

HOLY NATIVITY EPISCOPAL PRE-SCHOOL

749 DURHAM ROAD
WRIGHTSTOWN, PA 18940
(215) 598-3711
durkin73@gmail.com

2010 - 2011 REGISTRATION FORM

GENERAL INFORMATION

1. Please circle the Program: (2 day AM) (3day AM) (3 day PM) (5 day AM)
Enrichment PM only - Circle the day or days that you are interested in, they are optional.
Monday-Tuesday-Wednesday-Thursday-Friday.

2. As of December 31, 2010 the age of my child is_____.

3. Child's full name. _____

4. Nickname. _____

5. Date of birth. _____

6. Mother's name. _____ Occupation_____

7. Father's name. _____ Occupation_____

8. Home address. _____

9. Home Phone. _____ E-mail_____

10. If your home is a single parent home, please give the name of the parent.

11. Names and ages of other children in family.

_____ Age_____

_____ Age_____

_____ Age_____

12. Church/Synagogue currently attend._____

EMERGENCY CARE INFORMATION

13. Business phones: Mother _____

Father _____

14. If you cannot be reached, please list names of people to be emergency contacts.

Name _____ Phone _____

Name _____ Phone _____

15. Family physician _____ Phone _____

16. List the persons who may pick up your child from pre-school other than parent(s).

Name _____

Name _____

17. List any physical or medical disorders that your child may have (i.e. allergies, hearing/speech problems, special medications) in order that we may be alerted to problems, which might arise.

In case of extreme emergency, if parents or family physician cannot be contacted, your signature on this registration form gives permission for a representative of Holy Nativity Episcopal Pre-School to accompany your child by ambulance to the nearest hospital emergency room.

CHILD'S SOCIAL INFORMATION

18. List any fears your child has that you feel is important for us to know.

19. List daily playtime activities your child enjoys.

20. Is your child content to spend time playing alone? _____

21. Does your child have other children near home as playmates? _____

22. Does your child have an attachment to a blanket or toy? _____

23. Is there any other information about your child that would help us provide a warm, happy experience? If any, please list.

24. Do you have hobbies, special interests, or vocation you would enjoy sharing with the children?

25. How did you learn about Holy Nativity Episcopal Pre-School?

REGISTRATION AND TUITION

The registration fee is \$50.00. It should accompany this completed registration form and is non-refundable. A class visitation is required before registration is finalized.

Holy Nativity Episcopal Pre-School, Wrightstown Township, Pennsylvania is owned and operated by Holy Nativity Episcopal Church. The Governing Board of the Church has the primary responsibility for the school to oversee the program. The Pre-School Advisory Board, chaired by the Pre-School Administrator, shall advise the Governing policies and procedures for the operation of the Pre-School. The Pre-School Director, teachers, and aides are employed by the Governing Board and under contract with the Governing Board.

Any concerns about your child's involvement in the program should be directed to the teacher and/or Pre-School Administrator.

*I have read the Information Guide for Holy Nativity Episcopal Pre-School on line

Parents or Legal Guardian's Signature (Both parents are required to sign)

_____ Date _____

_____ Date _____

Pre-School Director's Signature

_____ Date _____

Date registration fee paid _____