

Application for Enrollment 2021-2022



All students must be immunized. We do not except religious exemption.

Child's Name _____ Date of Birth ____/____/____

Street Address _____ City/State/Zip _____

Male/Female ____ Race/Ethnic Group: _____ Is child adopted? ____ Home Phone _____

Child lives with: Both Parents Mother Father Other _____

Father's Name _____ **Mother's** Name _____

Employer _____ Employer _____

Work Phone # _____ Work Phone # _____

Cell Phone # _____ Cell Phone # _____

Email _____ E-mail _____

Church Membership _____ Church Membership _____

Parents' Marital Status: Married Widowed Single Separated Single Divorced Remarried

My child will be enrolling for (check one):

Preschool 3's and young 4's: ____ Half Day (M-F 8 a.m.-noon) ____ School Day (8 a.m.-3 p.m.)

Transitional Kindergarten: ____ Half Day (M-F 8 a.m.-noon) ____ School Day (8 a.m.-3 p.m.)

Name of person who will be financially responsible to pay all fees and tuition charges _____

If child is enrolling in Half Day program, will child occasionally stay for nap? Yes No

List any fears, unique behaviors, etc. your child may have: _____

What discipline methods do you use at home that would be helpful for us to know (e.g. time out, rewards, certain phrases or words, etc.) _____

I have received and read a copy of the state of North Carolina Child Care Laws: Yes No