



# APPLICATION AND ENROLLMENT FORM

School Year 20\_\_\_\_/20\_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Gender \_\_\_\_\_

Child's Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Home/Cell Phone Number \_\_\_\_\_ 2nd Cell Phone: \_\_\_\_\_

Food allergies or chronic illness: \_\_\_\_\_ **Start Date:** \_\_\_\_\_

Can we photograph your child while he/she is in school?  Yes  No

- I give permission to release my e-mail, child's name, address & phone number to other families on the class list.
- I have spoken with the Director /Asst. Director and I am aware of my tuition obligation via Tuition Express. Enrollment fees are non refundable and any deposits securing future enrollment are non refundable. In order to claim a "vacation" week during the academic school year, I must attend for 12 consecutive months.
- I acknowledge that I have received & read The Grand Avenue Parent Handbook.

**E-Mail Address:** \_\_\_\_\_

*I would like my child to be enrolled in the session below. I give my permission to have my Tuition Express account debited the necessary enrollment fees per the current fee sheet.*

<b>Preschool</b>	AM <input type="checkbox"/>	5 Days <input type="checkbox"/> (M-F)	4 Days <input type="checkbox"/> (Varies)	3 Days <input type="checkbox"/> (MWF)	2 Days <input type="checkbox"/> (Tu/ Th)
<b>Preschool</b>	PM <input type="checkbox"/>	5 Days <input type="checkbox"/>	3 Days <input type="checkbox"/>	2 Days <input type="checkbox"/>	
<b>Extended Day Preschool</b>	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thurs <input type="checkbox"/>	Fri <input type="checkbox"/>
<b>K-5th Before School</b>	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thurs <input type="checkbox"/>	Fri <input type="checkbox"/>
<b>K-5th After School</b>	Mon <input type="checkbox"/>	Tues <input type="checkbox"/>	Wed <input type="checkbox"/>	Thurs <input type="checkbox"/>	Fri <input type="checkbox"/>
<b>Please note:</b>	<b>DAYS OFFERED</b>	<b>CAN VARY</b>	<b>BETWEEN</b>	<b>LOCATIONS</b>	

How did you hear about us? \_\_\_\_\_

What elementary school will/does your child attend? \_\_\_\_\_ Fall grade: \_\_\_\_\_

Siblings/Birthdays: \_\_\_\_\_

**Parent Signature:**  **This check mark signifies my signature & acknowledgement of information on this form.** **Date:** \_\_\_\_\_

**OFFICE USE ONLY**

\$75 Enrollment Fee \_\_\_\_\_ FALL P/S Pre-payment \_\_\_\_\_

\$75 Enrollment Fee \_\_\_\_\_ D.C. Deposit \_\_\_\_\_

\$75 RE-Enrollment Fee \_\_\_\_\_ SUMMER Prepayment \_\_\_\_\_ FALL Prepayment \_\_\_\_\_

T-Shirt \_\_\_\_\_ Bag \_\_\_\_\_ Last Day of Attendance \_\_\_\_\_

Authorizations \_\_\_\_\_ Biography \_\_\_\_\_ Birth Certif. \_\_\_\_\_ Medical \_\_\_\_\_ Health History \_\_\_\_\_ TE \_\_\_\_\_ DC-S/A Release/Bus \_\_\_\_\_



*Authorized Regular Pick-Up List ( Parents and Care Taker)*

Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____

*Contingency Pick-up List (someone local: i.e. relative, neighbor, etc.)*

Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____

*Emergency Contact List (can be someone out of town)*

Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____

*Persons NOT PERMITTED to pick up child*

Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____

PARENT Name \_\_\_\_\_ Marital Status \_\_\_\_\_  
Home Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_  
Parent's Employer \_\_\_\_\_ Occupation \_\_\_\_\_

PARENT Name \_\_\_\_\_ Marital Status \_\_\_\_\_  
Home Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_  
Parent's Employer \_\_\_\_\_ Occupation \_\_\_\_\_

**Parent Phone Numbers:** Please list in order of priority, e.g. Mom work: 708-333-3333

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

Child's Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_