St. Paul's Pre-School Registration

Child's Name: _____

Nickname: _____

Date of Birth: _____   **Age:** _____   **Gender:** _____

Address: _____ **Zip Code:** _____

Parent's name: _____ **Cell #:** _____

Email: _____ **Work #:** _____

Parent's name: _____ **Cell #:** _____

Email: _____ **Work #:** _____

Child Lives with: Both Parents_____ One Parent_____ if so, which one: _____

50/50_____ Other_____

Enrollment is on a "first-come, first-serve" basis, so please register early. Indicate your 1st and 2nd choices for the class you would like to enroll your child.

Classes Offered:

3- & 4-year-old Mon, Wed, Fri 9-11:30 AM _____

3- & 4-year-old Mon, Wed, Fri 12:30-3 PM _____

4 ½ -5-year-old Mon, Wed, Fri 9 AM-2 PM _____ (You must provide lunch.)

Please list any previous school experience your child has had:

_____

Tell us how you heard about St. Paul's Pre-School:

_____

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Emergency Contacts: In case of emergency, please list two people (other than parents) to contact if the parents cannot be reached:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Medical & Background Info

Allergies: _____

Doctor: _____ Hospital Preference: _____

Has there been any home experience that might affect your child's behavior in school- such as death, frequent moves, divorce, recent births, etc.?

_____

_____

Please list all siblings (names & ages): _____

Dismissal: If someone other than the child's parents will be picking up your child, they must show your child's carpool number. <u>You will also need to provide a note granting your permission</u>. This note can be sent into school with your child or shared with the pickup person.

Student Release Form

___ I give St. Paul's Pre-School permission to take photos or videos of my child and share them on our social media sites and in our printed publications for communication & advertising purposes.

___ I do not give St. Paul's Pre-School permission to use my child's photo or video on our social media sites and in our printed publications for communication & advertising purposes.

Signature: _____ **Date:** _____

Drop off or mail registration form along with $50.00 non-refundable registration fee to:

St. Paul's Lutheran Pre-School

c/o Julie Deitz

3108 Sterrettania Road

Erie, PA 16506