

**Church Street Preschool Enrollment Application**  
**PO Box 435 Valatie, NY 12184**  
**September 2017 to June 2018**

**Child's Name:** (First, M, Last) \_\_\_\_\_ Name Preference: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Age (at time of Application) \_\_\_\_\_  
Child has tendency to use: Left Hand \_\_\_\_ Right Hand \_\_\_\_  
Allergies/ Medical Concerns: \_\_\_\_\_  
Fears: \_\_\_\_\_ Fav. Play Materials: \_\_\_\_\_  
Prior Preschool/ Group Experience: \_\_\_\_\_

**Family:** Please enter both first and last name of both parents.  
Parent's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

If residence is different than mailing address, check here , then write mailing address on the back  
Home Phone #: \_\_\_\_\_ Cell# \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell# \_\_\_\_\_  
Email: \_\_\_\_\_ Email: \_\_\_\_\_  
Names of Parent(s) Child resides with: \_\_\_\_\_  
Parent's Occupation: \_\_\_\_\_ Parent's Occupation: \_\_\_\_\_  
Work Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_  
Emergency Contact: (Name, relationship, Phone #) \_\_\_\_\_  
Family Doctor/ Phone Number: \_\_\_\_\_  
Siblings names and ages: \_\_\_\_\_  
Other adults living in the home besides parents: \_\_\_\_\_  
Any of your children currently/in the past attend Church Street Preschool? Yes No (circle)  
Names: \_\_\_\_\_ Any other Previous Affiliation? Yes No (circle)  
Where did you hear of Church Street Preschool? \_\_\_\_\_

**The Preschool:** Child must reach age on or before November 30<sup>th</sup>, 2017, to be accepted.  
Please Check One: \_\_\_\_\_ 4 year old class: Monday, Wednesday, Friday 9:00am -11:30am  
Tuition: \$150.00/Month x 10 Months (\$1500.00/year)  
\_\_\_\_\_ 3 year old class: Tuesday, Thursday 9:00am – 11:30 am  
Tuition: \$125.00/ Month x 10 Months (\$1250.00/year)

***Tuition Payable August 28, 2017 – May 28, 2018 (10 monthly payments)***

**A photocopy of your child's birth certificate (required for all new students) and the non-refundable application fee of \$40.00 (Please make checks payable to Church Street Preschool) must accompany this application.**

Church Preschool does not discriminate on the basis of race, color, national origin, creed, sex and age or handicap as defined by law, and are in compliance with Title IX of the Education Amendments of 1972 and with Section 504 of the Rehabilitation Act of 1973.

**Acceptance is based on postmark date and availability of space in class desired. ALL applications must be mailed. Mail registration materials and fee to: Registrar/ PO Box 435/ Valatie, NY 12184**

I, the undersigned, have read and understand and agree to comply with, all the rules and regulations explained on the Church Street Preschool website.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar's use only: POdt \_\_\_\_ Clyr \_\_\_\_ BC \_\_\_\_ Hlthfm \_\_\_\_ Regfee \_\_\_\_ ck# \_\_\_\_ Acpt sent \_\_\_\_