

**Learning Path Preschool
Registration Form
School Year 2022-2023**

Child's Name _____ M ___ F ___ DOB _____

Address _____

Primary Phone Number _____

Primary Email _____

Mother's Name _____

Cell Phone _____

Business Address _____

Occupation _____

Father's Name _____

Cell Phone _____

Business Address _____

Occupation _____

Additional Information:

Previous School Experience: _____

Please check the class you are interested in and the days you will attend:

Pathfinders

(please check)	___ Mon	___ Tues	___ Wed	___ Thurs	___ Fri
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Explorers

(Must be 3 by October 1, 2022 and fully potty-trained)

(please check)	___ Mon	___ Tues	___ Wed	___ Thurs	___ Fri
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Adventurers

(Must be 4 by October 1, 2022)

(please check)	___ Mon	___ Tues	___ Wed	___ Thurs	___ Fri
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Before Care and After Care (Please circle time(s) below if extended care is needed.)

	Mon	Tues	Wed	Thurs	Fri
Before Care (please circle if needed)	8:00, 8:30, 9:00	8:00, 8:30, 9:00	8:00, 8:30, 9:00	8:00, 8:30, 9:00	8:00, 8:30, 9:00
After Care (please Circle if needed)	3:00, 3:30, 4:00	3:00, 3:30, 4:00	3:00, 3:30, 4:00	3:00, 3:30, 4:00	3:00, 3:30, 4:00

Child's Name _____

Emergency Contact(s)

Please list at least two **people** we can contact with information and/or to pick up your child, in your absence.

Name _____ Relationship _____

Phone Number(s) _____

Name _____ Relationship _____

Phone Number(s) _____

Name _____ Relationship _____

Phone Number(s) _____

The person(s) listed below are authorized to pick up my child from school. _____
initial

With this application, I grant permission for my child to use all equipment and participate in all school activities. With this application, I authorize the Director, Assistant Director or Teacher, if unable to contact a parent or emergency person, to obtain any emergency medical treatment that may be warranted for my child.

I am enclosing a non-refundable \$50 registration fee (per family) and understand that a non-refundable tuition deposit of one payment, based on the program I choose, is due by March 1, 2022, in order to complete my registration and secure my child's placement for the coming school year. If my tuition deposit is not received by March 1, 2022, I understand that my child's registration will be voided.

Parent Signature _____ Date _____