



Didsbury Preschool Society

P.O. Box 424 – 2154 18th Avenue Didsbury, AB T0M0W0

Revised: 2018-01-24

September 2018 to June 2019 ~ Pre-registration Form

Child's Name: _____ Age: _____
First Middle Last

Child's Birth-date: _____ Male: _____ Female: _____
Month Date Year

Child's mailing address: _____

Email Address: _____ Please include your email address. To be used for preschool information purposes only.

Person with whom the child resides:

Mother and Father _____ Mother Only _____ Father Only _____ Guardian _____ Shared or Other _____

Are there any special family circumstances the teacher should be aware of? Yes _____ No _____

If yes, please explain: _____

Does your child have any difficulties with speech, communication or other areas of development the teacher should be aware of?

If yes, please explain: _____

Parents or Legal Guardian Information: Email address: _____

Mother: _____ Home # _____

Cell # _____

Place of work: _____ Work # _____

Father: _____ Home # _____

Cell # _____

Place of work: _____ Work # _____

I wish for my child to be registered in the following program: (please circle one)

1 day per week - \$60.00 per month

2 days per week - \$95.00 per month

Please number the days listed below as first choice, second choice etc.
for 1 day per week please circle the day you prefer.

Monday / Wednesday a.m. - 8:45 a.m. to 11:15 a.m.

Monday / Wednesday pm - 12:30 p.m. to 3:00 p.m.

Tuesday / Thursday a.m. - 8:45 a.m. to 11:15 a.m.

Tuesday/Thursday p.m. - 12:30 p.m. to 3:00 p.m.

Please note: The Didsbury Preschool Society will try to accommodate your first choice. However, classes will depend on registration numbers and majority class choice. Please be sure you have read the *Handbook* and included the non-refundable \$80.00 registration fee – (this includes the \$1 society membership fee), to ensure your child's place. Earliest registrations will be accommodated first.

Signature of

Parent or Legal Guardian: _____ date: _____ 2018

Parent or Legal Guardian: _____ date: _____ 2018

For office use only:

Child's Name: _____ Birth-date: _____ Age: _____

1st Choice for day: Monday / Wednesday Tuesday / Thursday a.m. p.m. Male / Female

Registration: Cheque # _____ / Cash \$ _____ Accepted by: _____ Date: _____ 2018