



# The Didsbury Preschool Society

## September 2012 to June 2013 ~ Pre-registration Form

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

First Middle Last

Child's Birth-date: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Month Date Year

Child's mailing address: \_\_\_\_\_

### Person with whom the child resides:

Mother & 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                      2 days per week

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.	<input type="checkbox"/>
Tuesday/Thursday a.m.	-	8:45 a.m. to 11:15 a.m.	<input type="checkbox"/>
Monday / Wednesday p.m.	-	12:30 p.m. to 3:00 p.m.	<input type="checkbox"/>

Please note: The Didsbury Preschool Society will try to accommodate your first choice. However, classes will depend on registration numbers and majority class choice. Earliest registrations will be accommodated first. Please be sure you have included the non-refundable \$75.00 registration fee to ensure your child's place.

Signature of

Parent or Legal Guardian: \_\_\_\_\_ date: \_\_\_\_\_ 201\_\_\_\_\_

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: Paid \_\_\_\_\_ Cheque \_\_\_\_\_ Cash \_\_\_\_\_ Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_ 201\_\_\_\_\_