



1400 South Broad Street • P.O. Box 402  
Cairo, Georgia 39828  
(229) 377-9742

## Registration Form

**All applicants must pay a non-refundable registration fee of \$100.**

Please check class for which you are registering:

- 2 yr. old class – Monday thru Friday (\$135 per month)  
 3 yr. old class – Monday thru Friday (\$135 per month)  
 4 yr. old class – Monday thru Friday (\$135 per month)

Please check if needed:

- Early arrival beginning at 7:15 a.m. (\$25 per month)

### Child's Information

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

### Parent/Guardian Information

Mother's Name \_\_\_\_\_ Phone \_\_\_\_\_

Mother's Address \_\_\_\_\_

Mother's Occupation & Workplace \_\_\_\_\_

Mother's Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Email: \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone \_\_\_\_\_

Father's Address \_\_\_\_\_

Father's Occupation & Work Place \_\_\_\_\_

Father's Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Email: \_\_\_\_\_

**Family Information**

Please list the names and ages of brothers and/or sisters.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Please list any other persons living with the child and their relationship to the child.

\_\_\_\_\_

**Personal History**

Does your family attend church? \_\_\_\_\_ If so, where? \_\_\_\_\_

Has your child had previous group or preschool experience (daycare, church, nursery, etc.)? \_\_\_\_\_ If so, where and when? \_\_\_\_\_

Please list any allergies (food, animals, etc.) or medical conditions:

\_\_\_\_\_  
\_\_\_\_\_

**Emergency Information**

Please list the names and phone numbers of 3 adults who can be notified in case of illness or emergency if the parents cannot be reached.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Please list the people who will be dropping off or picking up your child this year. **Anyone who is not on this list will not be allowed to pick up your child without your written permission!**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Would you be interested in after-school transportation if it was available for \$25 per month? (Circle One) Yes No

Please list any other information about your child that you think we should know.

\_\_\_\_\_  
\_\_\_\_\_

.....  
Please do not write below this line.  
.....

Registration fee: \$100.00      Date paid \_\_\_\_\_ Received by: \_\_\_\_\_