

Date Received (For Office Use Only): _____



Northminster Learning Center
Northminster Presbyterian Church

Please check all the boxes that apply:

Curiosity Corner: 8:30-11:00 a.m.

- I would like my child enrolled in the Mon./Tues. session of Curiosity Corner.
- I would like my child enrolled in the Wed./Thurs. session of Curiosity Corner.
- I would like my child to be enrolled in the Wed./ Thurs./Fri. session of Curiosity Corner

Discovery Preschool: 1/2 day sessions *Please mark session AND schedule*

Session:

Schedule:

- Morning Session 8:30-11:15 a.m.
- Afternoon Session 12:15-3:00 p.m.
- the 4 day program of Discovery Preschool. (Mon-Thurs)
- the 5 day program of Discovery Preschool. (Mon-Fri)
- I will accept an afternoon spot if a morning spot is not available.

Full Day Preschool: 8:30 a.m.-3:00 p.m. Monday –Friday

- I would like to enroll my child in full day preschool.
- I am interested in using before school care.
- I am interested in using the after school program.

Kindergarten: 8:00 a.m.-3:00 p.m.

- I would like to enroll my child in full day kindergarten.
- I am interested in using before school care for my kindergarten student.
- I am interested in using the after school program for my kindergarten student.

Please complete:

My child will be _____ years _____ months on September 1, 2012.

2012-13 Early Childhood Program Application

Please print clearly

Date _____

Child's Name _____
Last First Middle

Nickname (if any) _____ Date of Birth _____ Sex _____

Child lives with _____

Mother's Name _____ Home Phone _____

Street Address _____

City/State/Zip _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Email Address _____

Father's Name _____ Home Phone _____

Street Address (if different than above) _____

City/State/Zip _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Does your child have any special health problems/concerns? No _____ Yes _____

Is your child on any medications? No _____ Yes _____

Does your child have any food allergies or diet restrictions? No _____ Yes _____

Names of any sisters or brothers _____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

Has your child attended a preschool program? No _____ Yes _____ If so where: _____

Is there anything else you think we should know about your child? No _____ Yes _____

Would you like to learn more about Northminster Presbyterian Church (ex. newsletter, worship schedule, etc.)?

No _____ Yes _____

Signature of parent/guardian _____ Date _____

Please note if your family/child meets any of the following criteria:

My child is a current student. I am a Northminster Learning Center staff member.

We are members of Northminster Presbyterian Church.

Other Considerations: