

Registration/Health Form

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HomePhone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\_\_\_\_\_\_\_\_\_\_\_\_DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Business Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address(include city)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address(include city)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Boy Girl (circle one)

Any known food allergies or medical conditions I need to be aware of:

Emergency Contact: (name, relation, and phone number)

Persons authorized to pick up the child, relationship & phone number:

Check classes you are registering for:

Tues/Wed/Thur Tuition is $125 per month

Times: \_\_\_\_\_ to \_\_\_\_\_\_

$50.00 non-refundable registration fee \_\_\_\_\_\_\_check \_\_\_\_\_\_\_cash

\*Make Checks payable to Mandi Klein

Registration is complete when registration form and fee are turned in. Classes are filled on a first come first choice basis. If the class you requested is filled, you will be notified to see if another time would be okay. If you are registering more than one child, make a copy of this form. Each child needs to have their own form.

For and in consideration of the above child in Arts & Smarts Preschool, we the undersigned parents agree if any sickness, accident or injury occurs to your child while at school, Arts & Smarts preschool or its personnel will not be held liable. Therefore, we agree to hold and save harmless, Arts & Smarts Preschool or its owner, teachers, or other personnel from any liability whatsoever. In case of an emergency or serious illness, when parents cannot be reached immediately, I hereby authorize Arts & Smarts preschool to obtain emergency medical care and/or provide emergency medical transportation. I grant permission to allow my child’s photo to be taken and posted on Arts & Smarts Facebook page. We also agree to the following policies concerning payment and pick-up. Tuition is payable by the fifth of each month, a late fee of $5.00 will be assessed if tuition is paid later than the fifth. Preschool sessions are over at the above stated times. Parents later than ten minutes will be charged a $5.oo late fee.

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents Signatures\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_