

**EARLY EDUCATIONAL AREA**  
**Nursery-1<sup>st</sup> grade**

Child's Full Name: \_\_\_\_\_

Nick Name: \_\_\_\_\_

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

Parents (Guardians) Names: \_\_\_\_\_

Siblings Names: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ To reach during class if your child needs you.

**Mom is at:**

1<sup>st</sup> Period Class: \_\_\_\_\_

2<sup>nd</sup> Period Class: \_\_\_\_\_

3<sup>rd</sup> Period Class: \_\_\_\_\_

4<sup>th</sup> Period Class: \_\_\_\_\_

Are you willing to come into the nursery during your free time to help out when needed?

Yes / No If so where do you usually spend your free time so we can get you? \_\_\_\_\_

\_\_\_\_\_

**Child info:**

Any medical conditions? Yes / No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Any food or chemical allergies? Yes / No If yes, please list: \_\_\_\_\_

\_\_\_\_\_

Who is allowed to pick child up from class? \_\_\_\_\_

\_\_\_\_\_