

Parkville Recreation & Parks Council

postmark _____ Class _____ Accepted _____ Waiting List _____ Withdrawn _____

Pine Grove Tots Fun Center Application for Admission

****PARENTS ARE ENCOURAGED TO ACTIVELY PARTICIPATE IN THE CLASSROOM****

TYPE OF APPLICATION: check one

_____ New Enrollment _____ Reapplying (currently in 3's, applying for 4's)

_____ Alumni (sibling currently in program)

CLASS SELECTED: check one

___ 3-yr-old **AM** class **A** (M & Th 9:30-11:30) **OR** ___ 3-yr-old **AM** class **B** (Tu & Fr 9:30-11:30)

___ 4-yr-old **PM** class (Mon, Tues, Wed, Thurs & Fri 12:30-2:30pm)

CHILD'S NAME: _____ **NICKNAME** _____

Birth date: _____ Sex: _____ Phone: _____

Address: _____

PARENTS (guardians): _____
(Parent's first & last name) (Parent's first & last name)

If single parents household, with whom does the child live with? _____

Parent: _____ / _____
(cell phone #) (Address, & place of employment & phone #)

Email: _____

Parent: _____ / _____
(cell phone #) (Address, & place of employment & phone #)

Email: _____

CHILD'S PHYSICIAN: _____ phone # _____

(please complete & sign opposite side)

Does your child have any allergies? Yes _____ No _____

State allergy & reaction:

Does your child have any special needs, traits, habits or problems the teachers should be aware of?

Yes _____ No _____ Language Spoken at Home _____

Describe:

List the names and birth dates of other children in the family and preschool program attended:

Choose at least 2 class jobs: (see enclosed descriptions)

Party Parent (Halloween) _____ (Xmas) _____ (Easter) _____ Fundraiser _____
Smock Washer _____ all parents will help cut out craft pieces.

***Check if you'd like to serve as a Board Member:** (see enclosed descriptions)

President _____ Vice President _____ Treasurer _____ Secretary _____

***Attention parents applying to the 3-year old program:** We currently have needs for the Vice President and Secretary positions at this time. Please check the appropriate box above if interested.

**** I agree to abide by the policies set forth in the STATEMENT OF POLICY AND ORGANIZATION of this program.**

PARENT SIGNATURE

DATE

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