

# Dancer's Studio Performing Arts Christian Preschool

Children must be 3 years old by September 1 of the year they enter preschool. Children are required to be toilet trained.

**Application must be submitted with a \$30 registration fee.**

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Child's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_ Gender : \_\_\_\_\_

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

Child Lives with: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred Contact Method: \_\_\_\_\_

Father's Name: \_\_\_\_\_ - \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred Contact Method: \_\_\_\_\_

## Emergency Contacts other than Parents:

(in case of sickness or other need for early dismissal from school, we may call and child may be released to these people if we are unable to reach parents)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Allergies/Medical Concerns:** \_\_\_\_\_

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