



Preschool Re-Enrollment Form

*If you are enrolling a student for the very first time at Northridge Preschool, you must complete the long application form.

Registration Fee Paid \$	_____
Date Paid	_____
Method of Payment:	_____
	_____ Check
	_____ Cash

Student Information:

Full Name: _____
Address: _____
City, State, Zip Code: _____
Phone Number: _____
Date of Birth: _____ Gender: _____

List any medical concerns that we should be made aware of in case of emergency; such as daily medications, allergies to foods or medications, etc.

Please check the program you are interested in for your child:

	(3 ____ / 4 ____ Year-Old)	(4's Only)
Half-Day (7:30-12:30):	_____ 3 Days	_____ 5 Days (M-F)
Full-Day (7:30-4:30):	_____ 3 Days	_____ 5 Days (M-F)
	(Tuesday/Wednesday/Thursday)	

Family Information:

Father's full name: _____	Mother's full name: _____
Address: (only if different from student) _____	Address: (only if different from student) _____
Place of Employment: _____	Place of Employment: _____
Cell Phone: _____	Cell Phone: _____
E-Mail address: _____	E-Mail address: _____

Emergency Contacts:

If parents cannot be contacted, indicate responsible adults to contact in case of emergency. These persons also have permission to pick up your child from school, in the event you are unable to do so.

Contact 1: Name: _____
Relationship: _____
Cell Phone: _____

Contact 2: Name: _____
Relationship: _____
Cell Phone: _____

Church Information:

Church affiliation (if any): _____
Do you and your family attend regularly? Yes or No

A non-refundable registration fee of \$225 (\$75 Registration + \$150 Activities Fee) must accompany this application to guarantee student placement.

☐ I give permission for my child's photos to be utilized in all forms to promote the Preschool and events.