

FIRST DISCOVERY PRESCHOOL
2010-2011 Registration Form

Child's name _____ Sex: M F
Last First Likes to be called

Birth date _____ Student's Social Security _____

Student's Address _____ Phone _____

Father's Name _____ Address (if different) _____

Work Phone _____ Home Phone # _____ Cell Phone _____

Mother's Name _____ Address (if different) _____

Work Phone _____ Home Phone # _____ Cell Phone _____

These people are allowed to pick up my child:

Name	Phone	Relation
Name	Phone	Relation
Name	Phone	Relation

List of siblings and ages

Name	Age	Name	Age
Name	Age	Name	Age

I give permission for my child to go on school-supervised field trips Yes ___ No ___

I give permission for photos to be taken of my child for publication Yes ___ No ___

Circle one: We prefer M-W-F (\$90/mth) T-Th (\$75/mth) A.M. session
M-W-F (\$90/mth) M to F (\$135/mth) P.M. session

We will do our best to accommodate all requests on a first-come basis.
\$45 Deposit paid? Y N

OVER

Child's physician _____

Has child had a physical? Y N Has child had a dental exam? Y N

Are immunizations complete? Y N Do you have a copy of immunizations for us? Y N

Do you have a copy of the dental exam? Y N

Does your child have any medical conditions of which the staff should be aware Y N

If yes, please explain condition (including food allergies) and procedures staff should follow:

Any additional information that would be helpful to our staff when working with your child:

If school lets out early because of heat/snow/ice or other emergency, this child should follow the following procedure: _____

I understand that Preschool is a tuition-based program. I will be required to pay tuition fees
by the first day of each month.

Signature of Parent or Guardian

Date

First Discovery Preschool
801 W 25th St.
Yankton, SD 57078
605-665-6362