ADMISSION APPLICATION

PARENT/GUARDIAN INFORMATION

First Parent

		Identification & Vehicle Information
Name		
Address		
Address 2		
Phone Number		
Email		
Employer	Employer Phone	

Second Parent (Optional)

		Identification & Vehicle Information
Name		
Address		
Phone Number		
Email		
Employer	Employer Phone	

CHILD(REN) INFORMATION

First Child

		Office Use Only
Name	Academic Goals	
Age	Preferred Language	
Current School	Allergies	

Second Child

		Office Use Only
Name	Academic Goals	
Age	Preferred Language	
Current School	Allergies	

PROGRAM INFORMATION

	First Child			Second Child		
Desired Classroom:	☐ 3 to 6	☐ 7 to 10	☐ 11 to 13	☐ 3 to 6	☐ 7 to 10	☐ 11 to 13
Attendace Days:	Language Choice			Language Choice		
Full Time/Part Time:	French	Spanish		French	Spanish	
Hours:	☐	☐		☐	☐	
Choice of Attendance Days:	1st	2nd	3rd	1st	2nd	3rd

MEMBERSHIP INFORMATION

	Single Child	Two Children	Three Children	Four Children	Five Children	Six Children
Basic Membership	☐	☐	☐	☐	☐	☐
Family Access	☐	☐	☐	☐	☐	☐

MEAL PLAN

	Breakfast	Bkfst & Lunch	Lunch	Dinner	Family Dinner	Specify Days of Week
Weekly	☐	☐	☐	☐	☐	
Monthly	☐	☐	☐	☐	☐	
A la Carte (include days)	☐	☐	☐	☐	☐	

EMERGENCY CONTACT INFORMATION

		Identification & Vehicle Information
Emergency Contact Name		
Address		
Phone Number		
Email		
Employer	Employer Phone	

PICK-UP & DROP-OFF AUTHORIZATION

		Identification & Vehicle Information
Name & Relationship	Name & Relationship	
Address	Address	
Phone Number	Phone Number	
Email	Email	