

CHRIST CHURCH PRESCHOOL APPLICATION for 2023/24 SCHOOL YEAR

Please **mail** this form to our Registrar, Emily Rodack, 104 Link Ave., Pittsburgh, PA 15237. An application form must be completed for each child. There is a non-refundable Registration Fee of \$55 due with submission of this form.
Make checks to Christ Church Preschool.

Registering for:

* Age requirements are for current year. North Hills District (only) requires Aug 1 rather than Sept 1 for 3's & 4's.

- **Great Start Class**—must be 2 by Mar. 31st* Mon./Wed (9:15-11:15am) Tue./Thu. (9:15-11:15am)
- **3 Year Old Class**—must be 3 by Sept. 1st* AM 3s Tue/Th (9-11:30am) PM 3s Tue/Thu. (12:15-2:45pm)
- **4 Year Old Class**—must be 4 by Sept. 1st* AM 4s M/W/F (9-11:30am) PM 4s M/W/F (12:15-2:45pm)

Child's Name: _____ Nickname: _____
First-Middle-Last

Gender: _____ Date of Birth: _____ Public School District: _____

Home Address: _____

Mother's Name: _____ Cell Phone: _____ Work Phone: _____
Occupation: _____ Same Home Address as child? Yes No

Home Address if Different: _____ Email: _____

Father's Name: _____ Cell Phone: _____ Work Phone: _____
Occupation: _____ Same Home Address as child? Yes No

Home Address if Different: _____ Email: _____

With whom does the child live? Both Parents Mom Dad Other: _____

Names of Siblings: _____ Age: _____
_____ Age: _____

Other Household Members: _____

Does your child have up-to-date immunizations? (Required) _____

Does your child take medication on a regular basis? _____

Does your child have any special needs, allergies, food restriction? If yes, please explain: _____

Does your child understand English? _____ Does your child speak English? _____

What is your child's hand preference? LEFT RIGHT

Does your child have any special interests? _____

Are you a member of Christ Episcopal Church? Yes No

How did you hear about our Preschool? _____

Are you registered with Dart Services, IEP Assistance Therapy, or TSS? _____

Will your child have an aid attend Preschool classes with him/her? _____

OFFICE USE ONLY
Date Received _____ Class _____ Check Date _____ Check Amount _____
Notes _____