

# Messiah Moravian Preschool

## Application for Enrollment 2010-2011

Please check the days desired:

|                          |  |                                 |                                  |                                    |                                   |                                 |
|--------------------------|--|---------------------------------|----------------------------------|------------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> | <b>Toddler Class</b><br>must be 1 yr old | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday | <input type="checkbox"/> Friday |
|--------------------------|--|---------------------------------|----------------------------------|------------------------------------|-----------------------------------|---------------------------------|

Please check the class desired:

|                          |   | M/W/F | T/Thurs | Mon-Thurs | Mon—Fri |
|--------------------------|---|-------|---------|-----------|---------|
| <input type="checkbox"/> | <b>Two Year Old Class</b><br>must be 2 by 8/31/10   |       |         |           |         |
| <input type="checkbox"/> | <b>Three Year Old Class</b><br>must be 3 by 8/31/10 |       |         |           |         |
| <input type="checkbox"/> | <b>Four Year Old Class</b><br>must be 4 by 8/31/10  |       |         |           |         |
| <input type="checkbox"/> | <b>Readiness Class</b><br>must be 5 by 8/31/10      |       |         |           |         |

### General Information

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Child's Full Name \_\_\_\_\_ Name child goes by \_\_\_\_\_

Birth date \_\_\_\_\_ Male  Female

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ E-mail address \_\_\_\_\_

#### Parent Information:

Mother's name \_\_\_\_\_ Occupation/ Place of Employment \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Father's name \_\_\_\_\_ Occupation/ Place of Employment \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Marital status \_\_\_\_\_

Siblings (name and age)

\_\_\_\_\_

Church presently attending \_\_\_\_\_

Would you like to receive information about Messiah Moravian Church?

## Emergency Contacts

Please list 3 local contacts who can be called in case of emergency and have your consent to pick up from school.

| Name | Cell phone | Home Phone | Relation to child |
|------|------------|------------|-------------------|
|------|------------|------------|-------------------|

| Name | Cell phone | Home Phone | Relation to child |
|------|------------|------------|-------------------|
|------|------------|------------|-------------------|

| Name | Cell phone | Home Phone | Relation to child |
|------|------------|------------|-------------------|
|------|------------|------------|-------------------|

## Medical Information

Child's doctor \_\_\_\_\_ Phone \_\_\_\_\_

Doctor's address \_\_\_\_\_

## About your child

Previous preschool experience \_\_\_\_\_

Allergies \_\_\_\_\_

Other information you would like us to know about your child \_\_\_\_\_

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

- *Registration fee and first month's tuition are non-refundable.*
- *Registration fee is due at registration. First month's tuition is due May 1.*
- *Registrations after May 1 should include the registration fee and the first month's tuition.*
- *Activity fee due September 1.*
- *Fees are based on the 2010-2011 school calendar which takes holidays into account and allows parents to pay equal tuition payments monthly.*

**Messiah Moravian Preschool**  
1401 N. Peace Haven Road  
Winston-Salem, NC 27104

For office use:

Registration \$ \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_\_

Activity fee \$ \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_\_

Tuition \$ \_\_\_\_\_ # \_\_\_\_\_ Date \_\_\_\_\_

Medical Form \_\_\_\_\_ Start Date \_\_\_\_\_