



PART TIME PRESCHOOL APPLICATION 2017-2018

A non-refundable \$30 registration fee must accompany this form.

CHILD'S NAME _____

BIRTHDATE _____ AGE _____ MALE _____ FEMALE _____

PARENT 1 NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ OTHER _____

EMAIL ADDRESS _____

EMPLOYER _____ OCCUPATION _____

PARENT 2 NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ OTHER _____

EMAIL ADDRESS _____

EMPLOYER _____ OCCUPATION _____

PROGRAM OPTIONS

Morning

____ M/W/F 9:00-11:30

____ T/TH 9:00-11:30

____ M-F 9:00-11:30

Afternoon

____ M/W/F 1:00-3:30

____ T/TH 1:00-3:30

____ M-F 1:00-3:30

** Children must be 3 years old
and potty trained by August 23,
2017 to enroll in preschool*

Parent's Signature _____

Date _____

FOR OFFICE USE ONLY

Date Received _____

Registration fee _____

Application Received by _____

Days Enrolled _____

D/C _____

I/C _____



48 E. N. Broadway Columbus, Oh 43214
p (614) 262-6222 f (614) 268-2115
northbroadway48@att.net

