

## Tell Us About Your Child

Child's Name \_\_\_\_\_

Has your child been in preschool/daycare before? \_\_\_ Yes \_\_\_ No

Is your child comfortable in group situations? \_\_\_ Yes \_\_\_ No

Do you have any concerns about your child's development? \_\_\_ Yes \_\_\_ No

Hearing \_\_\_ Vision \_\_\_ Language \_\_\_ Gross Motor Skills \_\_\_ Fine Motor Skills \_\_\_ Social \_\_\_

Other \_\_\_\_\_

Is there anything we should know about your child's play with other children, by themselves, any concerns? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How would you describe your child's temperament and personality? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your child have any siblings? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your family have any pets?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What soothes your child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What frightens your child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your child have any favorite songs or games that comfort them? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there anything regarding your family, extended family or child that you would like to share with us?

\_\_\_\_\_

\_\_\_\_\_

Fairhope United Methodist Church Preschool  
ENROLLMENT FORM

Child's Full Name \_\_\_\_\_ Name Child is known by \_\_\_\_\_

Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Mailing Address \_\_\_\_\_

Church Affiliation \_\_\_\_\_

Mother \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone \_\_\_\_\_

Father \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_ Work Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_

Guardian \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

**NOTIFY IN CASE OF EMERGENCY: (If parents cannot be reached)**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Relationship to Child \_\_\_\_\_

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

My child will be regularly picked up at dismissal by:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(I understand that my child WILL NOT be allowed to leave with an unauthorized person)

Registration Fee is due at the time of enrollment. This is non-refundable.

Fee Paid \_\_\_\_\_ Check Number \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_