



Preschool Admission Form

For Office Use Only:
Date of Admission: __/__/__
Last Date of Care: __/__/__

Child Full Name _____ Date of Birth __/__/__

They are usually called _____

Parent/Guardian _____

Home address:

Primary Phone Number (____) ____--_____

Secondary Phone Number (____) ____--_____

Additional Phone Number (____) ____--_____

Email: _____

Place of employment _____

Parent/Guardian _____

Home address:

Primary Phone Number (____) ____--_____

Secondary Phone Number (____) ____--_____

Additional Phone Number (____) ____--_____

Email: _____

Place of employment _____

Please describe, if applicable, any specific medical, developmental, emotional, or educational needs your child may have: _____

What languages are spoken at home? _____

Describe your child's speech/language development: _____

Describe your child's motor/physical development: _____

Are there any significant factors or events which have affected your child's life? Please describe: _____

Are there any family circumstances or additional information that you feel is important for us to know? _____

How does your child prefer to be comforted? _____

What interests does your child have? How does she/he learn best? _____

Describe your child's peer relationships _____

Describe your child's relationships with adults _____

Why did you choose Davis Studio Preschool? How do you hope our program will benefit your child? _____

The following people are authorized to pick up my child:

Name: _____

Phone number (____) ____ -- _____

Name: _____

Phone number (____) ____ -- _____

Please attach a copy of your child's immunization record to this form.

- In the event that I do not apply sunscreen to my child, I give my permission to allow teachers at Davis Studio Preschool to apply sunscreen to my child before going outside.
- I give my permission for Davis Studio Preschool to use photos of my child on the preschool blog and/or for marketing purposes. I understand that my child's name will NEVER be attached to his/her photo or used in any way.
- Yes _____ I grant permission
- No _____ I do not grant permission and understand that my child will not be pictured on the password protected Preschool Blog.

Parent/Guardian Signature

Printed Name

date