

Class _____

Reg. Fee Date: _____

Admission Date _____

Cash/Check # _____

WILCO PRESCHOOL ENROLLMENT AND PERSONAL FORM

Child's Name _____ Nickname _____ Sex ____ Age _____

Address _____ City _____ Zip Code _____

Phone # _____ Birthdate _____ Birthplace _____

Cell Phone # _____ Email Address _____

School District _____ Primary Language _____

Emergency Contacts (At least 2 people other than parents within the area)

Name _____ Relationship _____

Address _____ Phone _____

Name _____ Relationship _____

Address _____ Phone _____

Physician _____ Phone _____

Names of people authorized to pick up your child. Your child will NOT be allowed to leave with anyone w/o written or verbal permission of parent.

Father's Name _____ Address _____

Occupation _____ Work Phone _____ Home Phone _____

Mother's Name _____ Address _____

Occupation _____ Work Phone _____ Home Phone _____

Family Status: Single Parent Married Separated Divorced

Legal Guardian _____

Other Children _____ Age _____ Grade in School _____
