

# Argyle Preschool Enrollment Form 2017-2018

Registration fee \$75.00 enclosed \_\_\_\_\_

Session:

M/W/F Pre K \$120.00/mo. \_\_\_\_\_

T/ Th Preschool \$95.00/mo. \_\_\_\_\_

Name of Child: \_\_\_\_\_

Name to use in class: \_\_\_\_\_

(aka: Sam instead of Samuel)

Child's DOB: \_\_\_\_\_

Parent/ Guardians name(s) and address:

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Is this ^^ the address preschool correspondence should be mailed to? (yes or no) \_\_\_\_\_

**EMERGENCY CONTACTS: Please list the names and contact information for the person(s), including yourself, to call in the event of an emergency.**

1.

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2.

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3.

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**How did you hear about Argyle Preschool?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Name of person(s) responsible for monthly tuition fees:** \_\_\_\_\_

\_\_\_\_\_

**Elementary School and District # your child will attend:** \_\_\_\_\_

\_\_\_\_\_

**Name, address and phone # of Pediatrician:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Any known allergies or health concerns?** \_\_\_\_\_

\_\_\_\_\_

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