WILDWOOD BAPTIST PRESCHOOL & KINDERGARTEN 2022/2023 REGISTRATION THREE DAY 2's

TUE/WED/THUR

Age 2 by 9/1/2022

Date:	Phone:			
Students Full Name:		Gender: M	1 or F	
Nickname:	Birthdate:	Age:		
Address:				
ľ	Street			
City	State	Zip Code		
Primary e-mail:				
	******	**********	*****	
Parent/Guardian One				
Last Name	First Name			
Relationship to student		Cell Phone :()		
Work Phone: ()		_		
Employer:	Occupation:			
Parent/Guardian Two				
Last Name	First Name			
Relationship to student	Cell Phone :()			
Work Phone: ()		_		
Employer:	Occupation:			
Does the student have a parent	t/guardian that lives	at another address? Yes No		
Who:A	.ddress:			
Siblings:				
Name:	Age:	School:		
Name:	Age:	School:		
Name:	Age:	School:		

*******	***********	*******		
How did you hear about of Are there any health prob Allergies:	our school?lems the teacher should know about?			
Please list 2 people who will assume temporary care of your child if you cannot be reached and the relationship to the student. These people are also authorized to pick up your child				
Name:	Relationship	Phone:		
Name:	Relationship	Phone:		
Preschool & Kindergarter give my permission for the	MEDICAL PERMISSION emergency involving my child, I underson will make every effort to contact me. the school to seek medical attention for mensibility. I agree to hold harmless WB.	If the school cannot reach me, In the school cannot reach me,		
trips. Parent understands hold WBP&K liable in ar	FIELD TRIP/SCHOOL ACTIVITY rmission for child to participate in scho that his/her agreement to this permission by way for accidents, injuries, or illness fic details regarding each field trip will	ol sponsored activities and field on means that Parent will not incurred on any school		
photographs of my child compensation. I release a privacy or confidentiality	PHOTO RELEASE o allow Wildwood Baptist Preschool and for print, online and video-based marke and hold harmless WBP&K from any refor child. I release WBP&K from any NO \[\]	ting material with no easonable expectation of liability for any claims by me		
fee if paid after the 10 th	TUITION/REGISTRATION y tuition of \$235.00 on the 1st day of the month. Tuition is broken into 1 slong as the child is enrolled whether of	0 equal payments beginning ir		
	ONTH'S NOTICE if withdrawing cheyond withdrawal notice if one full mon			
I have paid the \$235.00 N	VON-REFUNDABLE Registration Fee			
D //C	Date:			
Parent/Gua	ardian			