

Grace Community School
ENROLLMENT APPLICATION FORM

Child's Full Name: _____ DOB: _____

Sex: _____ Nickname: _____ Start Date: _____

(Please include area code with all phone numbers)

Mother (or legal guardian)

Father (or legal guardian)

Name: _____

Name: _____

Address: _____

Address: _____

_____ Zip _____

_____ Zip _____

Home Phone: _____

Home Phone: _____

Place of Employment: _____

Place of Employment: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

In case of an emergency and the PARENTS cannot be reached, please contact the following:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

The following people are authorized to pick up and drop off the above child:

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Please list any special instructions or allergies for the above child: _____

My child is toilet trained ____ Yes ____ No

PARENT'S AGREEMENT

I hereby give my consent to have my child treated by a physician for medical or surgical care should an emergency arise. I understand that every effort will be made to contact me or a relative before such action is taken. I have been advised that Grace Community School provides liability insurance for my child. My child may take approved field trips sponsored by the child care facility. I hereby give my consent to have my child photographed and/or videotaped and his/her picture placed on display at the childcare facility, reproduced and printed in our student yearbook, and/or displayed on the school's website.

I agree to pay the weekly tuition for the time my child is enrolled. I understand that I may withdraw at any time by notifying the school **two full weeks in advance**. Withdrawal is effective the *following* Friday of the week of notification, and all fees are payable upon other absences. I agree to pay the book and material fee.

I have received and read the policies of Grace Community School, and agree to abide by the regulations set forth in them; including the obligation to confer with the school first if I have any questions or problems.

Parent Signature: _____ **Date:** _____