

ABIDING BRANCHES COOPERATIVE PRESCHOOL REGISTRATION

St. Joseph's Church, 171 Elm Street • 651-214-3288

Living Waters Church, 865 Birch Street • 612-598-7284

MWF Pre-K

TTh AM

TTh PM

MWF AM

MWF Pre-K

9:30-12:00

9:30-11:45

12:30-2:45

9:15-11:30

12:30-3:30

CHILD'S NAME _____ BIRTH DATE _____

Please write the name you prefer your child to be called at school

month/day/year

Address _____

Street

City

Zip

Home Phone Number _____

(Area Code)

PARENTS' NAMES _____

Home address _____

Home phone # _____

Occupation _____

Work address (city only) _____

Work phone # _____

Cell phone # _____

E-mail address _____

The following people, **other than his/her parents**, are authorized to pick up my child from preschool (Carpool, Neighbor, etc.):

Name _____ Phone _____

Name _____ Phone _____

EMERGENCY INFORMATION

EMERGENCY CONTACTS (if parents cannot be reached, these are the people we will try to contact in an emergency)

(1) _____
Name _____ Relationship to Child _____

Phone Number _____

Address _____

(2) _____
Name _____ Relationship to Child _____

Phone Number _____

Address _____

PHYSICIAN _____
Name _____ Address _____ phone _____

DENTIST _____
Name _____ Address _____ phone _____

ALLERGIES _____