



Tiny Town Preschool Enrollment Application for 2024-2025

Child's Name _____

Goes by _____

Age by Sept 1st _____ Birthdate & Year _____ Sex _____

Mailing Address _____

Apt _____ City _____ State _____ Zip _____

One emailed that is checked often: _____

Name of Mom _____ Mom's Cell _____

Mom's Employer _____ Work Phone _____

Name of Dad _____ Dad's Cell _____

Dad's Employer _____ Work Phone _____

Hospital Preference should an emergency arise _____

Emergency Contact (besides a parent) _____ Number _____

Relationship to child _____ How many days of week will your child be attending _____

Please add the following phone numbers to the school wide texting system (Remind App) for important school notices and reminders. This is not a normal group text but set up through a system so no one else can see phone numbers or responses.

I do not wish to be included at this time _____

Wears diapers _____ Wears pull-ups _____ Tried but has no desire _____

Goes off & on in potty but still working on it _____ Fully potty trained _____

Food allergy or any type of other allergy we need to be aware of ex. latex or medical attention concerns such as possible seizures.

Please list all people that MAY pick your child up from school besides the ones are the front:

Name _____ Relationship to child _____

Name _____ Relationship to child _____

Name _____ Relationship to child _____

Name _____ Relationship to child _____

Please List People that may NOT pick your child up from school:

Name _____ Relationship to child _____

Name _____ Relationship to child _____

Does your family attend church regularly? YES or NO (circle one)

If so, where _____

Circle one: I allow or I don't allow

my child to be in preschool pictures that will be posted on the preschool Facebook page and/or preschool website.

I have read the parent handbook and agree to abide by all policies and procedures to the best of my ability.

Parent signature _____ Date _____