Referred by:	
Reg. Fee Paid:	

GREYSTONE BAPTIST PRESCHOOL

7509 Lead Mine Road, Raleigh, NC 27615 (919) 870-0040

APPLICATION FORM

Last Name		First Name	Middle Name	Name child uses				
CIRCLE AGE AND CLASS PREFERENCE:								
4 year old:	4 day (MTWTI	4 day (MTWTh) 5 day(MTWThF)						
3 year old:	3 day(MWF)	4 day (MTWTh) 5 day(MTWThF)					
2 year old:	2 day(TTh)	3 day(MWF)	5 day(MTWThF)					
Toddler:	2 day(TTh)	3 day(MWF)	5 day(MTWThF)	5 day(MTWThF)				
(Greystone Baptist Preschool reserves the right to cancel any class due to insufficient enrollment.)								
Child's Date of Birth Sex Church Preference								
Street Address/City/Zip								
Home Phone								
Fathers Name Mobile phone#								
Fathers occupation/Business address								
Mothers Name Mobile phone#								
Mothers occupation/Business address								
Email Address								
Siblings (Please include names and ages)								
Other persons living in home (Indicate child or adult)								
List allergies, medical conditions, drug sensitivities and other special conditions of which we should be aware.								
List physical handicaps, special testing or professional evaluations of which we should be aware								

		Referred by:				
			Reg. Fe	e Paid:		
Was child born premature? (Circle one)	Yes		No			
Circle if child is/was subject to:	earaches	colds	frequent noseble	eds		
	asthma	other _				
Any speech problems, unusual fears, ex	cessive jealous	y? If yes,	please explain			
Problems with toileting habits? (Child n	nust be toilet tr	ained be	fore entering 3 yea	r old class.)		
Which hand does your child prefer to use? (circle one) Left Right						
Previously attended preschools:						
Reasons for leaving:						
Please give us any additional information	n about your c	hild that	might help us take	care of him/her.		
Responsible person to contact in case o	f emergency w	hen pare	nts cannot be reac	hed:		
Name Phone#						
This is to certify that my child has pern supervised by the preschool staff. I als emergency form) to pick up my child ir arise while my child is attending prescl I do I do not want my chirectory.	o agree to be a nmediately in o nool.	available case of e	(or <u>I will designate</u> mergency or any p	someone on my roblems that may		
Signed:(Parent or Guardian)		D	ate			
(Parent or Guardian)						