

Greystone Baptist Preschool
7509 Lead. Mine Road, Raleigh NC 27615
(919)870-0040

Infant - Fours Enrollment Form
2025-26 School Year

Last Name First Middle Preferred Name

Select the class you wish to enroll your child in:

Infants Toddlers Twos Threes Fours

Check days of enrollment:

_____ **2 Day (T, Th)** _____ **3 Day (M, W, F)** _____ **5 day**

The four year old class is ONLY a five day a week class

Child's Date of Birth/Due Date _____ Sex _____

Was this child born premature? _____ Yes _____ No

Street Address/ City/Zip _____

Mother's Name _____ Mother's Email _____

Mother's occupation/Business address _____

Father's Name _____ Father's Email _____

Father's occupation/Business address _____

Siblings (Please include names and ages) _____

Other persons living in home _____

List of allergies, medical conditions, drug sensitivities, and other special conditions of which we should be aware: _____

List physical challenges, special testing or professional evaluations of which we should be aware: _____

Church preference _____

Please share a responsible person to contact in case of emergency when parents cannot be reached:

Name Phone Number

I do _____ I do not _____ want my child's name and address information to be included in the 2025-26 student directory.

Current Greystone families only!!

Please defer my child(s) registration fee for the 2025-26 school year to be charged in May 2025

_____ Yes _____ No

Signed _____ Date _____
(Parent or Guardian)