

**PLEASANT VALLEY PRESCHOOL REGISTRATION FORM
THREE/FOUR YEAR OLDS**

Child's Name	Nickname	Age	Birthdate	Sex
Address		Home Phone		
Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations needed				
Previous Child Day Care Programs and Schools Attended				
Baby-sitter's Name and Address			Baby-sitter's Phone Number	

PARENTS/GUARDIAN INFORMATION

Father	Employer & Occupation	Cell Phone Number
Home Address		Email
Mother	Employer & Occupation	Cell Phone Number
Home Address		Email
Directions to child's home from preschool:		
Are parents separated or divorced?	Is your child adopted?	Does he/she know?
Names of siblings and ages		
_____	_____	_____
_____	_____	_____

EMERGENCY INFORMATION

Allergies or intolerance to food, medication, etc. and action to take in an emergency	
Child's physician	Phone Number
Names & address of two emergency contacts	Phone Number
1.	
2.	

Person(s) authorized to pick up your child:
Person(s) NOT authorized to pick up your child:

