## **APPLICATION FOR ENROLLMENT** LITTLE PILGRIM SCHOOL

Fauntleroy Church, UCC 9140 California Ave. SW Seattle, WA 98136 932-5600

## TO PARENTS/GUARDIANS: The following information is necessary for school records.

Child's full name					Date of Birth	
	Last	First		Middle		
Nickname			_ Male	_ Female	Home Phone	
E-mail					Cell	
Child's					Cell	
Address					Phone	
Marital status of parents			Church Affiliation			
Parent's Name			Parent's Name			
Address			Address			
Employer			Employer			
Work Address	Work Address					
Work Phone			Work Phone			
Work Days & Hours	_ Work Day	Work Days & Hours				
Child's Physician					Phone	
Child's day care/child care	provider				Phone	
Others to contact in case of emergency:  Name		Re	lationship	Address		Phone
The following information more effectively.  Other group/preschool expo		hild's health and	d developmen	t will enable	school staff to serve y	ou and your child
Interests						
Abilities						
Fears						
Illnesses/Allergies						
Other children in the family	and their <u>birthdates</u> _					
Sleep habits (Bedtime and	naps)					
Other family circumstances	s which would help us t	understand your o	child?			
Class Time Preference: 3	3-5's AM Class	3-5's PM Clas	ss 2	2-3's M/T/W	2-3's Th/F	

(This does not guarantee placement in the requested class). 1/2017