





CHILD'S NAME \_\_\_\_\_ DATE \_\_\_\_\_

ANY PREVIOUS PRESCHOOL EXPERIENCE? \_\_\_\_\_

Does your child have any physical problems we should be aware of? (Sight, hearing, allergies, heart, etc.)

\_\_\_\_\_

Is your child on any medications? \_\_\_\_\_ If so, what type? \_\_\_\_\_

\_\_\_\_\_

Is your child right or left handed? \_\_\_\_\_

Is your child allergic to any foods or other substances? \_\_\_\_\_

\_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician's telephone \_\_\_\_\_

Address \_\_\_\_\_

Email address used most often (for preschool updates and information): \_\_\_\_\_

Please check for permission to take your child to a hospital in case of an emergency.

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

**\*\*Please note any additional health information which would be helpful.**

\_\_\_\_\_  
\_\_\_\_\_

CHURCH AFFILIATION \_\_\_\_\_

HOW DID YOU HEAR ABOUT OUR PRESCHOOL? \_\_\_\_\_

\_\_\_\_\_

Notice of Nondiscriminatory Policy As to Students

The Presbyterian Church of Prospect Preschool admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs.