

Atonement Preschool Emergency/Personal Information

Help us get to know your family better & obtain the emergency information we need before your child begins school.
This information is for staff use only and will not be released to anyone without your consent.

Child's Name _____ Birth date ____/____/____

Address _____ City _____ Zip _____

Mother's Name: _____ Father's Name _____

Mom's Day Phone (school hours) _____ Dad's Day Phone (school hours) _____

Occupation: _____ Occupation _____

Address (if different from child): _____ Address (if different from child): _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

E-mail Address _____ E-mail Address _____

Doctor's Name/Clinic _____ Phone _____

Dentist's Name/Office _____ Phone _____

Are these the doctor/dentist you would like contacted *in an emergency*? Yes _____ Other _____

Please list any allergies or special needs your child has which we need to be aware of _____

List **any persons** (other than parents) authorized to pick your child up from school:

Name	Relationship	Phone #
1. _____	_____	_____
2. _____	_____	_____

Please list **two** persons **other than parents** who can be contacted in an emergency – **required by law**

Name	Address	Relationship	Phone #
1. _____	_____	_____	_____
2. _____	_____	_____	_____

Child's Siblings Names and Ages _____

Activities you enjoy doing as a family _____

Pets Names & Type of Animal _____

2005-2006 ATONEMENT PRESCHOOL REGISTRATION FORM

School Use Only:
Reg. Date ___/___/___
Check # _____

NOTE: All information on this and the opposite side of this form *must* be completed before registration can be completed.

Child's Name _____ Male ___ Female ___

How did you hear about Atonement Preschool? _____

Member of Atonement Lutheran Church _____ Non-member _____

Indicate your first(1) and second(2) choices for the class you would like:

4/5 Year-Old Class Options:

Two-day per week class (\$85. per month tuition):

_____ 12:15-2:45 pm M/W

Three-day per week classes:

_____ 9-11:30am M/W/F (\$105. per month tuition)

Register early!! If we are unable to get your child into your first class choice, they will automatically be enrolled in your second. You will receive a confirmation of your class in June.

A non-refundable application fee of \$25.00 is due upon registration. Registration begins February 13, 2005 and continues until all classes are filled. After which, you may request to be placed on a waiting list.

Please return completed registration form with application fee to:

Atonement Preschool
1144 29th Avenue North
St. Cloud, MN 56303

Additional information:

*All children must be toilet-trained.

*Children must turn four by September 1, 2005 to enroll.

School begins the Tuesday after Labor Day. Classes run through May with the last day of class meeting the last day before Memorial weekend. Tuition is due the first day of each month.

If you would like to arrange a visit to our preschool, please call Atonement Preschool at 252-6203.

Upon registration a Welcome Letter, including additional forms to be completed, will be sent to you.

A Parent Handbook and information about preschool orientation will be delivered to you in August.

2005-2006 ATONEMENT PRESCHOOL REGISTRATION FORM

School Use Only:
Reg. Date ___/___/___
Check # _____

NOTE: All information on this and the opposite side of this form *must* be completed before registration can be completed.

Child's Name _____ Male ___ Female ___
How did you hear about Atonement Preschool? _____
Member of Atonement Lutheran Church _____ Non-member _____

Note: Children must be fully toilet-trained and must turn three by September 1, 2005 to enroll. Please see the list of characteristics to help determine your child's readiness for preschool.

To register, please confirm the class with a check [X]:

3 year old class (\$85.00 per month tuition):*
_____ 9-11:30am T & Th

*This class is designed to be an introduction to preschool for first-year students.

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