



Calvary Center School's Application for Admission to 4 Year Old Program

Please Print

Application Date ___/___/___

Student Information:

Student's Name: _____ Gender _____
(First) (Middle) (Last)

Date of Birth: ___/___/___ Address: _____
(Must be 4 by Sept. 1) (Street)

Home #: _____
(city, state, zip code)

Parent/Guardian Information:

Father/Step-Father/Guardian (Circle One)

Mr. Dr. Rev. Other

Mother/Step-Mother/Guardian (Circle One)

Mrs. Dr. Rev. Other

Full Name: _____

Full Name: _____

Address: _____
(If Different)

Address: _____
(If Different)

Employer: _____

Employer: _____

Occupation: _____

Occupation: _____

Work#: _____ Cell#: _____

Work#: _____ Cell#: _____

E-Mail Address: _____

E-Mail Address: _____

Are the parents married: Married Separated Divorced

Student resides with: Both Parents Father Mother Guardian

Correspondence regarding application should be sent to:

Both Parents Father Mother Guardian

Registration Information:

Are you currently a member of Calvary United Methodist Church? Yes No

Are you a current family returning to Calvary Center School? Yes No

Are you a past family returning to Calvary Center School? Yes No

How did you learn about Calvary Center School? _____

Does your child have any special health care needs? Yes No

If so, please provide a copy of your child's IFSP/IEP so that we can work with any service agencies to meet the unique needs of your child.

Registration Information: (Cont'd)

Classes: Please select the days of the week you would like your child to attend:

Monday Tuesday Wednesday Thursday Friday

AM Care:

Monday Tuesday Wednesday Thursday Friday

PM Care:

Until 3:30: Monday Tuesday Wednesday Thursday Friday

Until 5:30: Monday Tuesday Wednesday Thursday Friday

LUNCH ONLY (Space is Limited):

Noon - 1:00: Monday Tuesday Wednesday Thursday Friday

Please return the Application for Admission to the address below, along with your check made payable to "Calvary Center School", in the amount of \$25.00. **Note: This Application fee is NON-REFUNDABLE.**

If your child is accepted into Calvary Center School, the director of the school will mail a contract to you in February. Once your child is accepted, a \$75 Registration is needed by the date indicated on the contract. **Note: This Registration Fee is NON-REFUNDABLE.**

Signature of Parent/Guardian: _____ Date: ____/____/____

Official Use Only
Date Received: ____/____/____
Application Fee: \$25.00
Check Number: _____
Recorded by: _____

Calvary Center School does not discriminate on the basis of race, color, national, and ethnic origin in administration of its educational policies, admissions policies, scholarships, and other school administered programs.