Toddler Time Application

SAND HILLS PRESCHOOL GRACE PRESBYTERIAN CHURCH 732-940-1515

Child's Full Name		Preferred Name	
Date of Birth	Sex	Allergies? Y/N	
Address			Zip
Parent/Guardian's Name	· 	Cell Phone	
Occupation		Business Phone	
Parent/Guardian's Name	· 	Cell Phone	
Occupation		Business Phone	
Email address			
Emergency Contact:	Name		
	Address		
	Phone		
A parent/guardian or the child attends.	zir designated responsib	ble adult caregiver must attend	each class when
·			
Phone Number			
		r 27, 2023 through May 2024.	
A COPY OF THE CHILD'S PAYMENT.	<u>'S HEALTH IMMUNIZA</u>	TION RECORD MUST BE PRE	SENTED WITH
_		/ designate) am to stay with an	
•	Sand Hills Preschool will	l not be responsible for liability	y regarding
accidents and injuries.			
Parent/Guardian's SignatureDate			
For office use only: Non Refundable registration fee	e \$10 & Tuition \$500/year	Paid by check # or Brightwheel date	
Non Refundable registration fee \$10 & Tuition \$500/year Paid by check # or Brightwheel date			