

Northern Cross Registration Form 2017-2018
Monday/Tuesday /Thursday - September through mid-May from 9-11:30
Registration \$35 (first month only, Tuition \$160 per month (non-refundable))
TOTAL: \$195 payable with this registration form

Please circle class for which child is registering:
Two year old (must be two by September 1, 2017)
Three year old (must be three by September 1, 2017)
Four year old (must be four by September 1, 2017)

PLEASE SIGN: I am aware that both the registration fee and tuition fee will not be refunded under any circumstances. _____

Are you a member of First Christian Church or an alumni of Northern Cross? _____

Today's date _____

E-mail address _____

Child's full name _____

Name child goes by _____ Gender _____

Date of birth _____ Age on September 1 _____

Child's home address _____

Child's home phone number _____

Parent or Guardian Information

Father's name _____ Cell phone _____

Father's address _____

Father's occupation and place of employment _____

Work phone _____

Mother's name _____ Cell phone _____

Mother's occupation and place of employment _____

Work phone _____

Family Information

Siblings (please indicated ages and whether they live with child):

Please list any other persons living with child and their relationship to child:

Persons authorized to pick up child: _____

Persons who *may not* pick up child: _____

Personal History

Is child right-handed or left-handed? _____

Has child had a previous group or preschool experience? _____

If so, where and when? _____

Does child have any allergies? _____

Are there any medical problems of which we should be aware? _____

What words does child use for toileting? _____

Does child have any bowel or bladder irregularities? _____