



FREELAND COOPERATIVE PRESCHOOL

EST. 1982

Registration Form

**PLEASE RETURN THIS FORM WITH YOUR \$75 REGISTRATION FEE.
IF YOU HAVE MULTIPLE CHILDREN IT IS AN ADDITIONAL \$50.**

- | | |
|--|--|
| <input type="checkbox"/> 3 YEAR OLD AM (CO-OP) | <input type="checkbox"/> 4 YEAR OLD AM (CO-OP) |
| <input type="checkbox"/> 3 YEAR OLD AM (NON-CO-OP) | <input type="checkbox"/> 4 YEAR OLD AM (NON-CO-OP) |
| <input type="checkbox"/> 3 YEAR OLD PM (CO-OP) | <input type="checkbox"/> 4 YEAR OLD PM (CO-OP) |
| <input type="checkbox"/> 3 YEAR OLD PM (NON-CO-OP) | <input type="checkbox"/> 4 YEAR OLD PM (NON-CO-OP) |

Child's Full Name: _____

Date of Birth: _____ Male _____ Female _____

Father's Name: _____

Address: _____ Telephone: _____

_____ Email: _____

Place of Employment: _____ Title: _____

Mother's Name: _____

Address: _____ Telephone: _____

_____ Email: _____

Place of Employment: _____ Title: _____

Siblings (Please include names and ages):

EMERGENCY CONTACT(Person who is able to be reached in case of emergency)

Name

Address

Telephone
