



Little Brick Schoolhouse

Registration Form

Name of child to be enrolled:

Date of birth:

Fathers name:

Mothers name:

Home address:

Child lives with: Both Parents Father Mother

Home phone:

Work phone:

Cell phone:

Email:

Name & phone number of 2 people who can be contacted in case of an emergency:

<i>name</i>	<i>number</i>	<i>relation</i>
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<i>name</i>	<i>number</i>	<i>relation</i>
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People allowed to pick my child up from preschool:

Special health needs:

Allergies:

Medication taken daily:

Other helpful information:

T-Shirt Size: Small (4) Medium (5/6) Large (6/7)

Monogrammed name on school bag (if different):
