



**Shelbyville Parks and Recreation Department
Preschool Registration/Emergency Form 2010-2011 School Year**

Child's Name: _____ Date of Birth: _____

Address: _____

(copy of Birth Certificate & shot records required at registration)

Age: _____ Sex: _____ Nationality: _____

Parents' information:

Mother: _____ Home Phone _____ cel _____

Address _____

Mother's place of employment _____ Phone: _____

Father: _____ Home Phone: _____ cel _____

Address _____

Father's place of employment _____ Phone: _____

*Child resides with _____

*Who is responsible for Preschool payments? _____

- Registration/Supply fee: \$60.00 is paid in full at the time of registration.
(Non-refundable if for some reason you drop out of program)
- Monthly fees are due by the 27th of each month or a \$10 late fee will be charged.
- Each parent will receive a Preschool Handbook that explains Preschool rules, policies and procedures. Please take the time to read it.
- Parents will also receive a payment book, please use the monthly coupon
- By signing below you are responsible for payment.

Signed: _____ Date: _____

(Parent or Legal Guardian)

*State rule: Child must be 5 by August 1st to go to Kindergarten

OVER.....