

Children's Learning Ladder

4351 Old Wm. Penn Hwy., Murrysville, PA 15668
724-327-6844

PRELIMINARY REGISTRATION APPLICATION

Dear Parents,

This application represents a request for admission. It must be accompanied by an application fee of \$50.00. The application fee is non-refundable.

Name of Child _____

Address _____

Student's Date of Birth _____ Place of Birth _____

Parent's name (or legal guardian) _____

Home Address _____ Home phone _____

Business Address _____ Bus. Phone _____

Parent's Name (or legal guardian) _____

Home Address _____ Home Phone _____

Business Address _____ Bus. Phone _____

Emergency Person (other than parent) _____ Phone _____

Address of Emergency person _____

Family Physician _____ Phone _____

Physician's Address _____

Date of Application _____ Starting Date _____

List any special medical or dietary information, allergies, medications, special conditions or disabilities:

Health Insurance: Agency's Name & Policy ID: (This information is required by the state)

Program Desired

(circle one)

Days & Hours of the Week

(circle days, list hours)

Preschool-18-24 months

Preschool – 24-36 months

Preschool – 3 yr. olds

PreK4

PreK5

Before School / After School

Monday _____ to _____

Tuesday _____ to _____

Wednesday _____ to _____

Thursday _____ to _____

Friday _____ to _____

Parent or Guardian Signature _____ Date _____