

Christian Preschool Adventure



2505 Jefferson Park Avenue
Charlottesville, VA 22903
434-296-KIDS (296-5437)

APPLICATION FORM - FAMILY HISTORY

Child's Name _____ Name Used _____

Address _____ Zip Code _____

Telephone _____ Cell Phone #1 _____ /Cell Phone #2 _____

Birth date ____/____/____ Male / Female (Circle one)

Is your child toilet trained? Yes ___ No ___ In Process _____

Father's Name _____ Age _____

Father's Occupation _____ Email Address _____

Business Address _____ Phone _____

Church Attending _____

Mother's Name _____ Age _____

Mother's Occupation _____ Email Address _____

Business Address _____ Phone _____

Church Attending _____

Are parents: Married ___ Separated ___ Divorced ___ Deceased ___ Single ___

Name, age and sex of other children in the family _____

Are there others living in the household? _____

Person responsible for child if both parents work _____ Phone _____

Emergency Contacts: _____ Phone _____

(If parents are not reachable) _____ Phone _____

Please list any medical problems or information we should know about your child _____

Please complete the other side of this form. Thank you!

Parent's Signature _____

Date _____

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To enroll your child, please return this form, plus a non-refundable \$75.00 registration fee. The first month's tuition will be required by July 15th.

We will need to see your child's CERTIFIED birth certificate or passport (proof of identity) on the night of parent orientation. *State law requires us to notify local authorities if proof of identity is not provided to the school.* A copy of your child's immunization record will also be due at this time.

Please make all checks payable to JEFFERSON PARK BAPTIST CHURCH.

Please check your program preference:

2 ½ year old program

2 days a week T/Th- \$160.00 per month _____

3 days a week M/W/F - \$200.00 per month _____

5 days a week M-F - \$260.00 per month _____

3 year old program

3 days a week M/W/F - \$200.00 per month _____

5 days a week M-F - \$260.00 per month _____

4 year old program

3 days a week M/W/F - \$200.00 per month _____

5 days a week, M-F - \$260.00 per month _____

Please complete the other side of this form. Thank you!
