

GREENWOOD FOREST CHILDREN'S CENTER REGISTRATION 2010-2011

Child's Name _____ Name s/he uses _____ Age _____

Address _____ City _____ Zip _____

Subdivision _____ Home Telephone _____

Cell # Mom _____ Cell # Dad _____ E-Mail _____

Birthdate _____ Male _____ Female _____ Race _____ Age Group (2s, 3s, etc.) _____

Parental Status: Single parent _____ Married _____ Comments: _____

Mother's Name _____ Employer _____ Phone(work) _____

Father's Name _____ Employer _____ Phone(work) _____

Brother(s) _____ Age _____ Sister(s) _____ Age _____

_____ Age _____ _____ Age _____

Two contacts when parents are not at home:

1. _____ Phone _____ Cell _____

2. _____ Phone _____ Cell _____

Has your child had previous preschool experience? _____ How long? _____

Where? _____

I give GFCC permission to conference (by phone or mail) with teachers of any previous school or schools _____ my child may have attended. Information received will be used for the sole purpose of providing the best services for your child.

Signature _____ Date _____

Are you aware of any handicaps or special needs your child may have? ___ Have these been evaluated? ___ If yes, who did the evaluation? _____

Does your child have an IEP? _____ If so, registration confirmation is tentative until the director is able to read the IEP and determine if GFCC is able to meet the needs of your child.

Does your child have food allergies? _____

Dietary restrictions (religious, cultural, etc.)? _____

Does your child have any other allergies or medical conditions? _____

In the event of an emergency, I hereby give my written consent for the school to secure immediate attention for my child, by his/her physician or in extreme emergency, any qualified physician, should I not be available. Signature _____ Date _____

Doctor: _____ Phone _____

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Religious affiliation _____

What special goals would you like your child to achieve?

Are you willing to share special talents? _____

Can we depend on Mother and/or Father to share transportation for field trips if the need arises? _____ (Yes/No)

I give permission for _____ to take all field trips with his/her class. It is understood that I will be notified before the event.

Signature _____ Date _____

I give permission for _____ to be included in group photos taken at school or on field trips to be used on our web site & literature, for the purpose of promoting the Greenwood Forest Children's Center programs, or to decorate our school bulletin boards. No names or other identification will be shown.

Signature _____ Date _____

PLEASE INDICATE YOUR CHOICE: (Number your order of preference)

Hours	Tuition			
Two Year Old	M/W or T/TH	_____	9:20 - 11:45	\$135.00
Two-and-a-half	M/W or T/TH	_____	9:20 - 11:45	\$135.00
Two-Day-Three	Tuesday & Thursday	_____	9:00 - 12:00	\$150.00
Three-Day-Three	Monday, Wednesday, Friday	_____	9:00 - 12:00	\$175.00
Progressive 3s/4s	Monday-Thursday	_____	9:00 - 1:00	\$240.00
Two-Day-Four	Tuesday & Thursday	_____	9:00 - 1:00	\$170.00
Three-Day-Four	Monday, Wednesday, Friday	_____	9:00 - 12:00	\$175.00
Five-Day-Four	Monday through Friday	_____	9:15 - 12:15	\$240.00
Transition	Monday through Friday	_____	9:00 - 1:00	\$275.00

Registration Fee \$100.00. The registration fee is not refundable unless you move from the Cary area before school begins. The Cary area includes Cary, Apex, Fuquay-Varina, Holly Springs, Raleigh, or within a 25 mile radius of the school. Greenwood Forest tote bags for 2s, 2 1/2s, 3s and 4s are included in the registration fee.

Tuition time table is August through April. Your first tuition payment is due on August 1. Tuition payments are due on the first of each month and no later than the 10th. Fifteen days notice for withdrawal.