



# Playschool Academy Student Information Form 2011 - 2012

Enrollment Date: \_\_\_\_\_

Withdrawal Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ Primary Phone: \_\_\_\_\_ H C W

Secondary Phone: \_\_\_\_\_ H C W Other Phone: \_\_\_\_\_ H C W

Address (if different from child):  
\_\_\_\_\_

Lives With Child?      Yes      No      Shared Custody

Father/Guardian: \_\_\_\_\_ Primary Phone: \_\_\_\_\_ H C W

Secondary Phone: \_\_\_\_\_ H C W Other Phone: \_\_\_\_\_ H C W

Address (if different from child): \_\_\_\_\_

Lives With Child?      Yes      No      Shared Custody

Other people living in home with child: (Indicate relationship next to name- i.e. sister)  
\_\_\_\_\_

Child will generally be picked up and dropped of by : \_\_\_\_\_

Other people authorized for transportation: \_\_\_\_\_  
\_\_\_\_\_

Please list any persons who are **UNAUTHORIZED** to pick up child: \_\_\_\_\_

**Allergies:** \_\_\_\_\_

Other Health Concerns: \_\_\_\_\_  
\_\_\_\_\_

Changes/Events/Issues (i.e. death in family, new baby, etc.) \_\_\_\_\_  
\_\_\_\_\_

Prior Group Experiences: \_\_\_\_\_

Please use back to explain any other information you feel is important for us to know about your child.

