## APPLICATION FOR AREA VOCATIONAL CENTER PRESCHOOL 2023-2024 School Year

1 <sup>st</sup> Semes	ster
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Child's Full Name		
First	Last	
Date of Birth	Age (as of today's date)	
Date of BirthMale	Female	2 <sup>nd</sup> Semester
street address		
city	zip	*Office use only
	Parent	
Home Telephone	Cell Phone	
Email address	(used for sending mass mailings t	to parents)
Mother's Name		
. Address		
Business Address		44-44-44-44-44-44-44-44-44-44-44-44-44-
Business Telephone		
Address		
•		
Place of Employment		<del></del>
Business Address		
Business Telephone		
Preschool Session		
11:40- 1:40 (2, 3, 4-ye	ar-olds)	
The first semester will begin Octo	ober 3, 2023 and run through December 7, 2023	3.
*First semester is Tues	sday/Thursday only	
The second semester will begin J	anuary 29, 2024 and run through April 25, 2024.	
	Ionday/Tuesday/Wednesday/Thursday	

A \$10.00 deposit (refundable until July 15th) is due at time of registration. Remaining fees are due at the start of each semester and are non-refundable after the first two weeks of each semester.

Cost will be \$60.00 for each semester.

(please complete application back)

Child's Physician		
Name	Phone	
Hospital of choice		
Persons authorized to pick up child o	other than parent or contact in case of an emer	genc
1		
name	relationship	
phone number	•	
name	relationship	
phone number		
·		
name	relationship	
phone number	<b>1</b>	
phone namoes		
Does your child have any food allerg	ries?	
pehavior that we need to know in orderstive one.	ncerning your child's health, development, or ler to make his/her experience in the preschool	la
•		
REQUIREMENT FOR PARTICIPAT	CHILD'S REGULAR ATTENDANCE IS A TION IN THIS PROGRAM. The AVC Presch	.ool
eserves the right to drop a preschool	student from the program for lack of attendan	ice.
Parent's signature		