

## GOSHEN CHRISTIAN PRESCHOOL 2024-2025 REGISTRATION FORM

Please complete this form & submit with the registration fee of \$75.00 (Made payable to Goshen Christian School)

\*This step is necessary to hold your child's spot for the new school year.

## Mail to:

Goshen Christian Preschool 2430 State Route 17A, Goshen, NY 10924

Child's full name		
Name of parents or guardian		
Address		
Town	State	_Zip
Date of birth		
Please check one:Na	atural child	Adopted child
Parents: (check one)N	SeparatedSeparated	Divorced
Father's place of employment		
Phone (cell & work)		

Phone (home)	Cell
Email	
Family Physician (name	& phone)
Please list any health pro	blems & medications child is presently
Name and phone number the event of an emergence	rs of two additional persons to contact in cy (other than parent):
1	
2	
personnel or to transport	t to call a physician or medical emergenchild to a hospital in the event of an above can be reached by phone.
How did you hear about	us?
Parent's Signature	
1 archi s signature	

\*All enrolling children must be fully potty trained and 3 years of age by December 1 of the new school year.

Is mother a member of a church?	How would you describe your child's personality?	
Name and location		
Is father a member of a church?	Favorite pastimes and interests	
Name & location	Does your child enjoy being read to?	
Does your child attend Sunday School?	Does your child enjoy singing?	
If so, where?	What hand is usually used?	
Names and ages of brothers and sisters	Please list experience with use of creative material such as clay, crayons, markers, scissors, tape, glue, paint, etc.	
Does your child receive extensive care by anyone other than parents?	Does your child participate in cleaning up his belongings?	
If so, by whom?		
How does your child relate to other children?	Dress self?	
	Is child completely toilet trained?(Child must be potty trained and self sufficient in the bathroom.)	
How does your child relate to adults?	Are there any speech difficulties or other services (i.e. OT/PT)	
Previous group experiences of child	that we should be aware of?	
Are there any particular behavioral concerns you wish us to be	Allergies?	
aware of?	Is there anything that you are specifically hoping for your child to	
What helps to reassure your child when upset?	accomplish in preschool this year?	

Please add any additional information or comments that migfurther the understanding of your child	*Goshen Christian Preschool makes no discrimination in admissions or determination of enrollment on the basis of race, creed, sex, color, or national origin.
Parental Signature	
*(Denotes acceptance of terms, conditions, and policy for p	payment schedule)
PLEASE CHECK ONE OF THE FOLLOWING	<u>G:</u>
Three Year Old Program *Age 3 by December 1 of the	the upcoming school year
3 Half Day (M/W/F) 9:00am-12:00pm	\$2,250.00 yearly/\$225.00 monthly
Four Year Old Programs *Age 4 by December 1 of	the upcoming school year
3 Half Day (M/W/F) 9:00am-12:00pm 3 Full Day (M/W/F) 9:00am-2:30pm	\$2,250.00 yearly/\$225.00 monthly \$4,000.00 yearly/\$400.00 monthly

<u>BLACKBAUD TUITION</u> \*We use the Blackbaud tuition payment program allowing convenient, modern payment methods, including online payments, payments by phone and a secure way to allow families to schedule one-time and recurring payments from both bank accounts and credit cards. All preschool families are required to use this ser vice for tuition payment and must be registered with Blackbaud by the first week of August.