



ROSECREST
LEARNING ACADEMY

Date_____

Child's name & age_____

Child's Birthday_____ Nickname_____

Address_____

Contact Info:

Mother's name_____

Father's name_____

(Mother) Home Phone_____

(Mother) Work Phone_____

(Mother's) Cell Phone_____

(Mother's) Email Phone_____

(Father) Home Phone_____

(Father) Work Phone_____

(Father's) Cell Phone_____

(Fathers) Email Address: _____

Emergency Contact Person_____

Contact's phone_____

Emergency Contact Person_____

Contact's phone_____

Do you have a backup care provider? _____

Your Child's Health

CHILD'S HEALTH RECORD: (A copy of your child's immunizations)

General state of health: _____ *Doctor's name* _____

Doctor's phone number _____

Dentists' name _____

Dentists' number _____

Are your child's immunizations up to date? _____ *(Please attach a copy of immunizations).*

Does your child have any known allergies?

Are you concerned that your child may be prone to any type of allergies? _____

Describe:

Does your child have any medical conditions which I should be made aware of?

*Has your child had the following common childhood illnesses?
(Please circle)*

Does your child have any problems with any of these?

Has your child had any of these diseases:

Constipation

Asthma

Convulsions

Bronchitis

Diarrhea

Chicken Pox

Fainting Spells

Diabetes

Frequent Colds

Heart Disease

Frequent Ear Infections

Hepatitis

Frequent Sore Throats

Impetigo

Lice

Measles

Ringworm

Mumps

Skin Rash

German Measles

Soiling

Polio

Stomach Upsets

Scarlet Fever

Urinary Problem

Tuberculosis

Worms

Whooping Cough

Does your child have any speech, hearing or visual problems?

Would there be any restrictions to play or activities?

About Your Child

Has your child ever been in Preschool before? ----- what type? (Center, family daycare, grandma, public etc.)-----

Was it a positive experience? -----

Is this your child's first or second year in preschool?

How does your child feel about preschool and being left by his/her mommy/daddy?

Are there any recent traumatic situations the child has been exposed to such as a death in the family, divorce, new sibling etc.?

We only use the Love and Logic methods for discipline. What is your normal method of discipline?

What is your child's temperament? Are they easy going, hard to please, demanding, aggressive, etc.

Are there any food restrictions?

What is your child's favorite food?

What food does your child dislike?

Can your child be relied upon to indicate bathroom wishes (all students must be fully potty trained)?

Are there any siblings? Please name them and specify ages and gender.

Name _____ age _____ gender _____

Name _____ age _____ gender _____

Name _____ age _____ gender _____

What language(s) are spoken at home?

What are your child's favorite activities, toys, books, or games?

Are there any other comments or information you would like to let me know about?

Any specific concerns?

Please pick below which class you would like to register for.

(2day) I _____ would like to enroll _____ in your Tuesday & Thursday AM class from 9:00-11:30. (a 5 min devotional (this class only) (on things such as David and Goliath and what it means to have true Courage) I understand the monthly cost is \$85.00 and is due on the first school day of each month. I also understand there is a nonrefundable registration/supply fee of \$50.00 due the same time as the enrollment packet and that this fee will guarantee my child a spot in the "Rosecrest Learning Academy".

(3day for students that know most letters and sounds) (Longer class time) I _____ would like to enroll _____ in your Monday, Wednesday, Friday AM class from 8:45-11:30. (More advanced writing & reading & math) I understand the monthly cost is \$105.00 and is due on the first school day of each month. I also understand there is a nonrefundable registration/supply fee of \$50.00 due the same time as the enrollment packet and that this fee will guarantee my child a spot in the "Rosecrest Learning Academy".

ONLY AM 5 DAY IS OPEN AT THIS TIME.....(5 days a week) Monday, Tuesday, Wednesday, Thursday, Friday - For this class you can just simply pick two of the classes above. Both classes can be AM or PM or one of each for example: M/W/F AM and T/TH PM or M/W/F Am and T/Th AM. It's really up to you. I understand the monthly cost is \$180.00 and is due on the first school day of each month. I also understand there is a nonrefundable registration/supply fee of \$80.00 due the same time as the enrollment packet and that this fee will guarantee my child a spot in the "Rosecrest Learning Academy".

(Parent signature)

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(Parent name in print) (Date)

Rosecrest Learning Academy

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www.rosecrestlearningacademy.com