

APPLICATION FOR ENROLLMENT

CREATIVE PRESCHOOL
FIRST METHODIST CHURCH
200 MARKET ST. WARREN, PA 16365
(814-723-4930)

Please complete this application and return it with a nonrefundable application fee of \$30 to First Methodist Church.

Creative preschool is a half-day preschool program. Our classes are in session from 8:30 a.m. until 11:15 a.m.(3-4 year old room) 8:45 a.m.-11:30 a.m.(Pre-K room) on Tuesdays, Wednesdays, and Thursdays. The cost is \$120.00 a month.

Once an application is turned in and the non-refundable \$30.00 registration fee is paid, your child will be enrolled in the appropriate class and you will receive confirmation from a staff member.

If additional applications are received after the class list has been filled, children will be added to a waiting list in the order that the applications are received and you will receive notification that your child is on the waiting list. Parents/guardians will be notified on or before July 15th if either a spot in the morning class has become available.

Children must be 3 years of age on or before September 1st and fully potty trained to be enrolled into the program.

PREFERRED CLASS: THREE YEAR OLD _____
(Please Check)

PRE-K _____

Staff Use Only:

Date received_____ **Reg. Fee Paid**_____ **Confirmation call**_____

CHILD'S FULL NAME _____

Gender: Male / Female (please circle one)

NAME TO BE USED AT SCHOOL _____

DATE OF BIRTH _____

AGE ON JULY 1st OF THIS YEAR _____ (Needed for appropriate classroom placement)

HOME ADDRESS _____

HOME PHONE _____

PARENT NAME _____ Relationship to child _____

PARENT CELL PHONE # _____

Parent Address _____

PARENT EMPLOYER _____ PHONE _____

PARENT NAME _____ Relationship to child _____

PARENT CELL PHONE # _____

Parent Address _____

PARENT EMPLOYER _____ PHONE _____

EMERGENCY CONTACT (Other than parents) DURING SCHOOL HOURS

Name _____ Address _____

Phone _____ Cell _____

DOCTOR'S NAME _____ PHONE _____

MMR VACCINATION DATE _____ We must have a current vaccination date on file

For your information, Creative Preschool participates in the Pre-K Scholarship Program through the Warren-Forest Economic Opportunity Council, PA's Educational Improvement Tax Credit Program, and local businesses. The goal of the Pre-K Scholarship program is to assist families with the cost of Pre-K programs to ensure as many children as possible benefit from an early learning opportunity. Families enrolled in Pre-K facilities will be given an opportunity to apply next fall for funds to be applied toward tuition. **This will be mailed out in August with a welcome packet.**

CREATIVE PRESCHOOL CONFIDENTIAL INFORMATION

CHILD'S
NAME _____

Siblings' Names	Age
_____	_____
_____	_____
_____	_____

Other's in home _____

Are parents living together? _____

Relationship with siblings? _____

Relationship with other children? _____

Recent changes in home environment? (moving, new baby, etc.) _____

Any particular areas of concern during the past year? _____

Does he/she speak clearly? _____ What sounds if any are difficult? _____

Any special fears at home? (thunder, dogs, the dark, etc.) _____

General Health: Energy _____

Allergies _____

Food Allergies _____

Glasses _____

Recurrent colds or ear infections _____

Hearing _____

Is your child right or left handed? _____

Has your child been serviced by Early Intervention or DHS? _____

Is your child currently receiving services from Early Intervention or DHS? _____

Does your child have any known special needs? _____

Learning needs _____

Physical needs _____

Developmental delays _____

Speech and language needs _____

Behavioral or emotional needs _____

Has your child ever attended daycare/preschool _____

Why do you want your child to attend Creative Preschool and what are your expectations? _____

Permission for walking excursions and photo publication

My child, _____, has permission to attend field trips with the Creative Preschool for the 2025-26 school year. Most field trips will be walking excursions. I understand that parents will be responsible for providing their own transportation for field trips when walking is not possible.

Parent or legal guardian Signature: _____

Date: _____

I grant permission to Creative Preschool to use my child's name and/or photographic image in production of any school publication and /or video, dvd, social media (Creative Preschool Facebook page) and/or other visual imaging.

Name of child _____

Parent or legal guardian signature _____

Date _____

