

CrossView Preschool on Tuesdays

REGISTRATION FORM for 2025-26 school year

Tuesdays 9:00-11:30am
For Preschoolers ages 3-4

Children must be 3 by September 1st, 2025 and can turn 5 while enrolled.

CHILD'S NAME _____ PRIMARY PHONE _____

HOME ADDRESS _____ PO Box _____
(Street)

CITY _____ STATE _____ ZIP CODE _____

PREFERRED EMAIL _____

CHILD'S AGE _____ BOY _____ GIRL _____ BIRTHDATE _____

MOTHER'S NAME _____ FATHER'S NAME _____

CELL PHONE _____ CELL PHONE _____

WORK PHONE _____ WORK PHONE _____

EMERGENCY CONTACT _____ RELATIONSHIP _____

HOME PHONE _____ CELL PHONE _____

PREFERRED HOSPITAL IN CASE OF AN EMERGENCY _____

DOES YOUR CHILD HAVE ANY MEDICAL ISSUES OR ANY ALLERGIES OF ANY KIND? YES _____ NO _____

IF YES, PLEASE EXPLAIN _____

ARE THERE ANY CUSTODY ISSUES WE NEED TO BE AWARE OF? YES _____ NO _____

IF YES, PLEASE EXPLAIN OR CONTACT US PRIVATELY _____

*Due to the nature of our classrooms, children do need to be potty trained.

SIGNATURE _____ DATE _____

Please contact Debbie Barker with any questions at deb@crossview.cc

PLEASE ALSO COMPLETE LIABILITY RELEASE FORM