

STONEHAM PUBLIC SCHOOLS
STONEHAM, MASSACHUSETTS

FOR OFFICE USE	
Date Received:	_____
Registration Fee:	_____
Check #:	_____

PRESCHOOL REGISTRATION FORM

Child's Name _____ Male _____ Female _____

Address _____ Email _____

Date of Birth _____ Place of Birth _____ Telephone _____

Father's Name _____ Occupation _____

Employer _____ Work Phone _____

Mother's Name _____ Occupation _____

Employer _____ Work Phone _____

Parent's Status: Married _____ Divorced _____ Widowed _____ Separated _____ Single _____

Child's Legal Custodial Parent: _____

Stepfather Name _____ Employer _____

Stepmother Name _____ Employer _____

Child's Primary Language _____ Nationality _____

Other Children in Family: Name _____ D.O.B. _____

_____ D.O.B. _____

Is your child taking any medication at this time? _____ If yes, what? _____

Is there any special information that the school should know about this child or other family members that would be of help in providing services for the child? _____

Is your child able to participate in a full gym program? _____ If no, explain _____

Please indicate your FIRST and SECOND choices:	South School	Colonial Park
2-day, AM (Mon., Tues. or Thurs.) -- 3 yrs. only	_____	<u>Not Available</u>
2-day, AM (Wed., Fri.) – 3 yrs. only	<u>Not Available</u>	_____
3-day, AM (Mon., Tues., Thrs.) – 3 yrs. only	_____	_____
3- or 4-day PM (Mon., Tues., Thrs., Fri.) – 4 yrs. only	_____	_____
3-day, A.M. (Mon, Wed., Fri.) – 4 yrs. only	<u>Not Available</u>	_____
\$45 per family Registration fee with Application -- Non refundable deposit due June 1, 2009		
<u>Tuition Payments:</u> Payment #1 due Aug. 1, 2009; Payment #2 due Nov. 1, 2009 Payment #3 due Feb. 1, 2010; Payment #4 due Apr. 1, 2010		