

**1Holy Cross Lutheran Cooperative Preschool
3786 Glasier Road—PO Box 706
Onaway, MI 49765
989-733-8412**

ENROLLMENT APPLICATION

DATE OF APPLICATION _____ ENROLLMENT FOR 3 YR. OLD _____ 4 YR. OLD _____

CHILD'S NAME _____ DATE OF BIRTH _____

PARENT'S/GUARDIAN'S NAMES _____

ADDRESS _____ PHONE _____

PARENT'S/GUARDIAN'S PLACE OF EMPLOYMENT:

MOTHER _____ PHONE _____

FATHER _____ PHONE _____

ALLERGIES? (INCLUDING FOOD) _____

EXPLAIN REACTION _____

HEALTH CORRECTION (SHOES, GLASSES, ETC.) _____

SPEECH PROBLEMS? _____

SPECIAL FEARS? _____

BEHAVIOR CONTROL PROBLEMS? (TANTRUMS, HOLDING BREATH, SCREAMING, ETC.)

WHAT METHOD OF BEHAVIOR CONTROL IS USED AT HOME? _____

_____ CHILD'S REACTION _____

OTHER CHILDREN AT HOME: (NAME)	_____	AGE	_____
(NAME)	_____	AGE	_____
(NAME)	_____	AGE	_____
(NAME)	_____	AGE	_____

SPECIAL INTEREST OF YOUR CHILD _____

SPECIAL INTEREST YOU COULD SHARE WITH OUR PRESCHOOL _____

A \$20 non-refundable registration fee is due upon return of this form. Return application to:

HOLY CROSS LUTHERAN COOPERATIVE PRESCHOOL, PO BOX 706, ONAWAY, MI 49765