



# Sunshine Preschool

A Ministry of Gladstone First Baptist Church  
Registration and Release Form  
2019-2020

## Participant and Enrollment Information

Child's Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Age on September 1, 2019 \_\_\_\_\_ DOB \_\_\_\_\_ Gender Male / Female

Days of Participation (Please check those applying for pending availability or pending assessment for PreK Option):

\_\_\_\_ Monday    \_\_\_\_ Tuesday    \_\_\_\_ Wednesday    \_\_\_\_ Thursday    \_\_\_\_ Friday

\_\_\_\_ Tuesday-Friday PreK Option    \_\_\_\_ Monday-Friday PreK Option (Monday is a blended class)

**Monthly Tuition:** \$60.00 for 1 day a week.  
\$110.00 for 2 days/week  
\$160.00 for 3 days/week  
\$210.00 for 4 days/week  
\$265.00 for 5 days/week

**Sibling Tuition** \$51 - 1 day  
**Monthly** \$94 - 2 days  
\$136 - 3 days  
\$179 - 4 days  
\$226 - 5 days

**4-Day PreK Option** \$220/mo.  
**5-Day PreK Option** \$270/mo.

## Family Information

Child primarily lives with: \_\_\_\_ Mother    \_\_\_\_ Father    \_\_\_\_ Guardian - relationship \_\_\_\_\_

Parent \_\_\_\_\_ Parent \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Home/Cell # \_\_\_\_\_ Home/Cell# \_\_\_\_\_

Work # \_\_\_\_\_ Work# \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

Sibling/Age \_\_\_\_\_ Sibling/Age \_\_\_\_\_

Sibling/Age \_\_\_\_\_ Sibling/Age \_\_\_\_\_

People authorized to pick up your child:

Name \_\_\_\_\_ # \_\_\_\_\_ Name \_\_\_\_\_ # \_\_\_\_\_

Name \_\_\_\_\_ # \_\_\_\_\_ Name \_\_\_\_\_ # \_\_\_\_\_

## Medical and Safety Information

Medical Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Primary Care Physician \_\_\_\_\_ Phone# \_\_\_\_\_

Food, Environmental and Drug Allergies \_\_\_\_\_

Describe any Health/Personal Issues we should be aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is your child potty-trained? Y / N If not, where are they at in this process? \_\_\_\_\_

\_\_\_\_\_

Please Initial:  My child's picture may be posted on family-only Sunshine Preschool Facebook Page

My child's picture may be posted on the GFBC church website

My child's picture may be printed on Sunshine information materials

My child's  name  picture  phone/address may be included in family-only Directory.

## Parent / Guardian Agreement

We, the undersigned parent(s)/guardian(s) of named participant, grant permission for the child to participate in the various activities of Gladstone First Baptist Church (GFBC) Sunshine Preschool.

We, as parents/guardians, understand this activity, as in any activity for children, does present the risk of injury, or even death, to the child, as rare as it may be. We represent to you that we and the participant assume the risk of any injury or death, and hold you, your agents, employees and representatives harmless from any liability to any other person or entity arising as a result of the conduct of the participant in this activity and agree to defend and indemnify you, your agents, employees and representatives against any claim or liability arising as a result of such contact.

If we, as parents/guardians are not personally present at these activities in which the participant is to participate, so as to be consulted in the case of necessity, you are authorized on our behalf to arrange for such medical and hospital treatment as you may deem advisable for the health and well-being of the participant.

My child has insurance and is under the supervision of Gladstone First Baptist Church.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_



### Sunshine Preschool

Brenda Crosby, Director

503-654-7728 (Church) 503-922-2857 (Cell)

6125 SE Caldwell Rd. Gladstone, OR 97027

Mailing Address: PO Box 5 Gladstone, OR 97027

sonshinepreschoolgfbc@gmail.com

Staff use only: Date Received \_\_\_\_\_

Completed and Signed Form

Paid \$80 Cash or Check# \_\_\_\_\_

PreK Assessment Result \_\_\_\_\_