

Providence Christian School
Nurturing Hearts ~ Educating Minds

Name of child _____ Birthdate _____ Sex _____
(Last) (First) (MI)

Address _____ City _____ State _____ Zip Code _____

E-mail address for correspondence with PCS _____

INFORMATION ABOUT THE FAMILY:

Father/Guardian's Name _____ Home Phone _____
Address _____ City _____ State _____ Zip Code _____
Where Employed _____ Business Phone _____ Mobile Phone _____
Mother/Guardian's Name _____ Home Phone _____
Address _____ City _____ State _____ Zip Code _____
Where Employed _____ Business Phone _____ Mobile Phone _____
Custodial Parent: Mother Father Other: _____
Insurance Carrier _____ Policy # _____

Names and ages of other children in the family _____

Are you currently a member of Providence Road church of Christ? Yes No

Do you belong to another church family? No Yes If so, where are you a member? _____

INFORMATION ABOUT YOUR CHILD:

Does your child have any known allergies? No Yes- Explain: _____

Please give any information concerning your child which will be helpful in his experience in group time (such as play, eating and sleeping habits, special fears, likes or dislikes) _____

EMERGENCY CARE INFORMATION:

Child's Doctor _____ Office Phone _____
Address _____ City _____ State _____ Zip Code _____

Child's Dentist _____ Office Phone _____
Address _____ City _____ State _____ Zip Code _____

Hospital Preference: CMC 704-355-2000 Presbyterian Main 704-384-4000 Other: _____

Please list the names of the persons we may contact in an emergency and to whom the child may be released to if you can not come for him/her:

Name _____ Relationship _____ Home Phone _____ Mobile Phone _____

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In addition to the emergency contacts listed above, the following parties may pick up my child(ren). (Must bring picture ID)

I authorize the above parties to pick up my child/children from Providence Christian School.

(Signature of Parent)

(Date)

Please check one for each category:

Part-time: (9:00 – 1:00 pm) 3's class 4's class T-K (5 days only) current school year Start date: _____

Monday Tuesday Wednesday Thursday Friday next school year

Full-time: (7:15 – 6:00 pm) 3's class 4's class T-K

Providence Christian School admits students of any race, color, and national or ethnic origin.