

**STUDENT REGISTRATION FORM**

**School Year 2012-13**  
**Tuskawilla Presbyterian Preschool**  
**3600 St. Road 426**  
**Oviedo, FL 32765**

Rec'd By: \_\_\_\_\_  
DOB Verif. \_\_\_\_\_  
Reg/Curriculum Fee \_\_\_ Ck# \_\_\_\_\_  
Date \_\_\_\_\_ Ck# \_\_\_\_\_  
Date \_\_\_\_\_

-----  
**CHILD'S FULL LEGAL NAME** \_\_\_\_\_  
Name child will be called at school \_\_\_\_\_  
Male or Female \_\_\_\_\_ SS# \_\_\_\_\_  
**Age** \_\_\_ **Date of Birth** \_\_\_\_\_ **Place of birth** \_\_\_\_\_

**Family Mailing Address** (please include city) \_\_\_\_\_

If you live in a subdivision/community, please tell us the name \_\_\_\_\_ (this provides the teachers with easy access driving directions)

**Home Telephone** \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Name of Father** \_\_\_\_\_  
Father's Place of Employment \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
Occupation \_\_\_\_\_ **Cell Phone#** \_\_\_\_\_

**Name of Mother** \_\_\_\_\_  
Mother's Place of Employment \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
Occupation \_\_\_\_\_ **Cell Phone#** \_\_\_\_\_

Name(s) and age(s) of brothers and/or sisters  
\_\_\_\_\_  
\_\_\_\_\_

Church family presently attends \_\_\_\_\_  
Denomination \_\_\_\_\_ Clergyperson's Name \_\_\_\_\_

Ethnic origin:  Native American  Asian  African-American  Hispanic  Caucasian

**Child's Physician** \_\_\_\_\_ **Phone** \_\_\_\_\_

Tuskawilla Presbyterian School agrees to notify the parent/guardian whenever this child becomes ill, and the parent/guardian agrees to have the child picked up as soon as possible.

The parent/guardian authorizes the school to obtain immediate medical care, at the expense of the parent/guardian, if any emergency occurs when he/she cannot be located immediately. A complete medical and immunization record, filled out by your child's physician must be given to the school during the first week.

**Fees due at the time of Registration are nonrefundable. Please indicate your understanding and acceptance of our School policy that Fees due at Registration are nonrefundable by initialing here: \_\_\_\_\_.**

**If you are registering your child for the Kindergarten Readiness class, please indicate your understanding that this class is designed strictly to prepare your child for entrance into Kindergarten only by initialing here: \_\_\_\_\_.**

Tuskawilla Presbyterian School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. TPS does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs and other school-administered programs.

Tuskawilla Presbyterian School Advisory Board has established that students must be in GOOD STANDING in order to be eligible for re-enrollment. A student considered in good standing is:

- One whose financial account is current
- One who, with his/her family, has demonstrated support of TPS programs, policies and standards.

The above information is complete and accurate to the best of my knowledge.

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

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

Please circle the class of your choice:

<b>Days</b>	<b>Class</b>	<b>Teacher Preference (NOT GUARANTEED)</b>
MMO	1 day 2 day	
2 –year-olds	2 day M/T 2 day TH/F 3 day W/T/F	
3-year-olds	2 day TT/F 3 day M/T/W 2 classes 4 day M/T/W/TH 5 day M/T/W/TH/F	
4-year-olds VPK ONLY	M/T/W/TH/F	
VPK Plus	M/T/W/TF	
Non-VPK	M/T/W/TH	