

Rev 2024



a mission of College Avenue Church of Christ

Class (Circle one): K3 K4 Regular pre-school hours are 8:00 a.m.-12:00 noon

Hourly extended care? yes no Full-Time extended care? yes no

Child's Name

Gender: Male Female Date of Birth:

Address street city zip

Contact e-mail address(es)

Best Number for Automatic Calling

Mother's Name

Address street city zip

Place of Employment Home phone #

Work phone # Cell phone #

Father's Name

Address street city zip

Place of Employment Home phone #

Work phone # Cell phone #

Child lives with: Both parents Father Mother Other

If child lives with a custodial parent, does the non-custodial parent have authorization to pick up the child?

Yes No

Church Affiliation

List siblings and their ages:

Is your child toilet trained? Describe assistance needed and words used.

To attend WCA, students must be fully toilet trained. If a child habitually has bathroom accidents after enrolling, the child will be disenrolled until they are fully toilet trained. Tuition must continue to be paid during the period of disenrollment in order to continue holding your child's spot.

Does your child have any special fears? _____

Does your child have any problems with vision or hearing? _____ If so, please explain.

Does your child have any health problems that we should be aware of? _____

Please explain. _____

Are there any foods or drinks that your child should not have? _____

What does your child usually eat for breakfast? _____

Do you have any concerns about any aspect of your child's development? _____

Is any language other than English used in the home? If so, please describe.

List illnesses your child has had _____

Does your child have frequent colds? _____ earaches? _____ sore throats? _____

stomach aches? _____ fevers? _____

Has your child had any serious accidents or operations? _____ If so, please describe.

Does your child have any allergies? _____ Please describe. _____

Does your child take any regular medication? _____

When did your child last see a doctor? _____ Dentist? _____

Are there any special medical, physical, or emotional needs that the school or staff should be aware of?

How much television does your child generally watch each day? _____

What are your child's favorite activities? _____

Does your child play well alone? _____ In groups? _____

Are there neighborhood playmates? _____ If so, what ages? _____

Does your child accept correction easily? _____

What method of behavior control is used in your home? _____

Please circle items below that describe your child...

Happy Aggressive Friendly Moody Clumsy

Dependent Stubborn Impulsive Fearful Quiet

Good-natured Even-tempered Attentive Sympathetic Shy

Sleepy Other: _____

Has your child learned to...?

Listen to stories? _____ Say his or her name? _____

State his or her age and sex? _____ Dress self independently? _____

Recognize and name common objects? _____

Count? _____ How far? _____

Follow simple directions? _____ Throw and catch a ball? _____

Name basic colors? _____ Hop on one foot? _____

Balance on one foot? _____ Ride a tricycle? _____

Write name? _____ Draw a person? _____

Has your child gone to preschool or daycare before? _____

Please describe previous experiences. _____

What do you hope will be included in your child's preschool program? _____

Corporal punishment (paddling) is a Biblical principal (Proverbs 13:24, Proverbs 22:15, Proverbs 23:13-14) and can be an effective deterrent to unwanted behavior. In determining whether to use corporal punishment, the following considerations will be taken into account: the seriousness of the offense, the attitude and behavior history of the student, and the availability of equally effective non-physical means of discipline. Corporal punishment will be administered by the Administrator with one adult witness present. If you do not wish for your child to receive corporal punishment, you understand that a parent may be called to administer punishment and/or pick up the student. Please *initial* below to indicate your choice:

Initial choice:

_____ Yes, my child(ren) **may** receive corporal punishment when deemed warranted by the administrator.

_____ No, my child(ren) **may not** receive corporal punishment. I understand I may be called to administer punishment and/or pick up my child from school if the administrator deems it necessary.

Emergency Information

Persons authorized to pick up your child (include parents):

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

If both parents are not authorized to pick up the child, please provide a copy of the divorce decree and/or custodial agreement prohibiting the unauthorized parent from picking up the child.

Persons to be notified in case of emergency if parents cannot be reached:

Name _____ Phone # _____

Name _____ Phone # _____

Name _____ Phone # _____

Child's Physician _____ Phone # _____

Address _____

Emergency Hospital Preference _____

School may obtain medical assistance if parent or emergency contact is unavailable: Y N

School may release contact information to College Avenue Church for outreach purposes: Y N

How did you hear about us? _____

I understand that the registration fee is non-refundable, and I agree to pay fees and accounts when due. If book fees are not paid by the end of June, my child's spot may be forfeited and the registration fee will NOT be refunded.

Signature of parent or guardian _____ Date _____

XX

Office use: Registration fee receipted _____

Permission form signed _____

Certificate of immunization _____

Copy of birth certificate _____

DHR form _____

Photo release _____

Book fee _____



PHOTO AND VIDEO RELEASE FORM

I, _____, as parent or legal guardian of

Child's Name _____

(Check One)

- Grant my permission
Withhold my permission

for Wiregrass Christian Academy to take photographs or record a video of my child during daily and/or special activities of the school. Such photos may be placed on school bulletin boards, used in the end-of-year slide show, included on the WCA web site and Facebook page, and used in local cable television and newspaper advertisements and articles.

Signature of Parent or Guardian

Date

If blanket permission is withheld, does Wiregrass Christian Academy have permission to take pictures of your child for Student of the Month bulletin board, end of year slide show, or classroom craft projects?

Yes, WCA may take pictures of my child for purposes stated above

NO, WCA may not take pictures of my child for any reason

Signature of Parent or Guardian

Date

THIS FORM MUST BE NOTARIZED

SECTION 2. FORM OF AFFIDAVIT (for parent/ guardian)
STATE OF ALABAMA
COUNTY OF: Coffee

Before me, a Notary Republic in and for said State and County, appeared

_____ and is known to me, after being duly

Parent Name

sworn or affirmed, says as follows:

That affiant is the parent or legal guardian of the minor child/children

_____ ; that affiant has been notified by

Sandra Turner, a representative of Wiregrass Christian Academy, that said

school has filed notice and is exempt under law from regulation by the

Department of Human Resources.

_____ Parent/Legal Guardian Signature

Sworn, or affirmed to and subscribed before me this _____ day of

_____, 20____.

My commission expires _____