READY, SET, GROW! PRESCHOOL ENROLLMENT APPLICATION 2026-2027

Child's Name _____(first) _____(middle)_____(last)

Male/ Female (circle) **Date of birth** _____ Child likes to be called _____

Address _____ City _____Zip_____

Preferred Phone _____ Siblings, Names & Ages _____

Email Address_____

Mother's Name _____

Address (if different) _____ City _____

Preferred Phone _____ Cell Phone _____ Work Phone _____

Place of Employment _____

Father's Name _____

Address (if different) _____ City _____

Preferred Phone _____ Cell Phone _____ Work Phone _____

Place of Employment _____

Guardian's Name (if other than parent) _____ Home Phone _____

Emergency Contacts: (other than parents)

1 _____ Home Phone _____ Cell _____

2 _____ Home Phone _____ Cell _____

Child's Doctor _____ Phone _____

Please Note Special Needs of Child (fears, dislikes, unique habits or words, special medical needs, dietary needs, allergies, etc.)

_____

How did you hear about RSG? _____

Previous Preschool Experience _____

PLEASE CHOOSE CLASS PREFERENCE: Please check the class options that you prefer.

_____ **Guppies (**Two-year old class**) 9:30-11:45am**

☐ T/TH ☐ *M/W *if available*

_____ **Goldfish (**3's & 4's**) 2 or 3 day class**, **9:30 -12:00pm**

☐ 2 day: T/Th or *M/W *if available*

☐ 3 day: M/W/F

_____ **Sharks** (Pre–K Class**) 9:30-12:00 / 4 or 5 days**

4 ☐ **5** ☐ **days per week**

M☐ **T**☐ **W**☐ **Th**☐ **F**☐

☐**Brockport** ☐ **Holley** -- ***My child is enrolled in a UPK Lottery***

** **Please note-minimum enrollment is required for a class to be offered.***

Please return this form with the non-refundable **registration fee of $50.00** ($45.00 if returned before April 15th). Fee is waived for Sharks (Pre-K Class), as well as for 2nd child in the family enrolling in the same year at RSG.

For Office Use Only: Date received: _____***(Form)*** *Cash____ Check #_____*

Ready, Set, Grow! Preschool 6787 Fourth Section Rd, Brockport, NY 14420 _____***(Reg. fee)***