



Director: Aimee Burns/ 574-727-1495
908 Columbia Street, Flora, In 46929
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CHILD PRE-REGISTRATION FORM

Child Code _____

Child's Name _____ Gender ____ Birthday _____ Date _____

Home Address _____ Home Phone _____

Basic Information:

Mother/Guardian's Name _____

Home Phone _____ Cell Phone _____

E-mail Address: _____

Address _____

Employer _____ Hrs. from _____ to _____

Employer Address _____

Business Phone _____

Father/Guardian's Name _____

Home Phone _____ Cell Phone _____

E-mail Address: _____

Address _____

Employer _____ Hrs. from _____ to _____

Employer Address _____

Business Phone _____

Preschool days preferred (8-noon) M T W R F

People allowed to pick up your child (use other side to add more names)

Name _____ Relationship _____

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