**Parent Registration Checklist**

Please complete and return all forms listed below

during registration.

\_\_\_\_\_\_\_\_\_\_\_\_ Enrolment Questionnaire

\_\_\_\_\_\_\_\_\_\_\_\_ Registration Form

\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Form

\_\_\_\_\_\_\_\_\_\_\_\_Supply List

\_\_\_\_\_\_\_\_\_\_\_\_ Medication Form (if needed)

\_\_\_\_\_\_\_\_\_\_\_\_ Health Inventory (signed and completed by parent and doctor)

\_\_\_\_\_\_\_\_\_\_\_\_ Allergy Form

\_\_\_\_\_\_\_\_\_\_\_\_ Financial Agreement

\_\_\_\_\_\_\_\_\_\_\_\_ Internet/Picture Consent Form

\_\_\_\_\_\_\_\_\_\_\_\_ USDA Meal Benefit Form

\_\_\_\_\_\_\_\_\_\_\_\_ Curriculum Information

\_\_\_\_\_\_\_\_\_\_\_\_ Parent Handbook

\_\_\_\_\_\_\_\_\_\_\_\_ Copy of Parent ID

\_\_\_\_\_\_\_\_\_\_\_\_ Copy of Immunization Record

\_\_\_\_\_\_\_\_\_\_\_\_ Registration Fee of $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ paid by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_ Curriculum Fee of $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ paid by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_ Weekly Tuition of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ paid by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Sign up for Automatic Debit and receive 50% off your Registration Fee…Ask for form at registration\*