

# The Carpenter's Clubhouse Preschool

Central United Methodist Church

113 South Piedmont Avenue

Kings Mountain, NC 28086

(704) 739-2471 ext. 108

## Application/ Re-enrollment Information:

(Please Print)

Student's Name \_\_\_\_\_  
First Middle Last (Preferred)

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Month Day Year

Please check the number of days that your child will attend: 5 days \_\_\_\_\_ 3 days \_\_\_\_\_ 2 days \_\_\_\_\_

Father- Legal Guardian (Mr./ Dr./ Rev.)	Mother- Legal Guardian (Mrs./ Ms./ Dr.)
Name _____ Last First	Name _____ Last First
Home Address _____ Street	Home Address _____ Street
City State Zip	City State Zip
Home Number _____	Home Number _____
Cell Phone _____	Cell Phone _____
Employer _____	Employer _____
Work Phone _____	Work Phone _____

## Information about Your Child:

Does your child have any known allergies (such as dust, drugs, plants, animals, food, etc.)? YES \_\_\_ NO \_\_\_

If YES, what are they? (Be specific) \_\_\_\_\_

Is your child completely toilet trained \_\_\_\_\_, in the process of learning to use the toilet \_\_\_\_\_, or not at all \_\_\_\_\_?

Previous school experience, if any? \_\_\_\_\_

Please share any information concerning your child that may be helpful to us. \_\_\_\_\_

\_\_\_\_\_

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## **Family History:**

<i>Applicant lives with: (check all that apply)</i>  <input type="checkbox"/> Mother <input type="checkbox"/> Stepfather <input type="checkbox"/> Other  <input type="checkbox"/> Father <input type="checkbox"/> Stepmother <input type="checkbox"/> Other	<i>Applicant's (check any that apply):</i>  <input type="checkbox"/> Father is deceased <input type="checkbox"/> Parents are divorced  <input type="checkbox"/> Mother is deceased <input type="checkbox"/> Parents are separated
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Please describe any special custody or visiting arrangements. \_\_\_\_\_

\_\_\_\_\_

Is the child adopted? \_\_\_\_\_ If YES, does the child know? \_\_\_\_\_

What was the child's age at the time of adoption? \_\_\_\_\_

Does your child have siblings? \_\_\_\_\_ Do they live in the same home? \_\_\_\_\_

Please list their names and ages. \_\_\_\_\_

\_\_\_\_\_

## **Religious Background:**

Does the applicant attend church?  YES  NO      Are parents members? \_\_\_\_\_

If so, what church? \_\_\_\_\_

What is the family's denominational preference? \_\_\_\_\_

Would you be interested in a visit from one of the members of Central United Church of Kings Mountain?  
 YES       NO

## **Additional Information:**

How did you hear about *The Carpenter's Clubhouse Preschool*? \_\_\_\_\_

\_\_\_\_\_

What influenced your decision to place your child in our program? \_\_\_\_\_

\_\_\_\_\_