



# OPEN REGISTRATION

## School on the Green

A Parent Cooperative Preschool Since 1972

School on the Green  
P.O. Box 1496 • Litchfield, CT 06759

Registrations **will not** be accepted if postmarked  
before February 14, 2017.

In accordance with Federal Law, School on the Green does not in any way discriminate on the basis of race, color, national origin, sex, age, or disability.

To complete the registration process, please return the completed 3 page form and \$50.00 non-refundable registration fee\* *by mail* to:

### For Administrative Use Only

Date Registration Received	/ /2017
Registration Fee Received - Check No.	
Acceptance Letter Sent	
Notes:	

### APPLYING FOR:

- 2 Day Program (Tuesday and Thursday)
- 3 Day Program (Monday, Wednesday, Friday)
- 5 Day Program (Monday - Friday)

All programs are ages 3-5 combined in **one** mixed-age classroom, 9:00 AM - 1:00 PM

Child's Name \_\_\_\_\_  
Last First Middle

Nickname \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex M F

Child's Address \_\_\_\_\_

Mother's Name \_\_\_\_\_

Mother's Address (if different) \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Employer Name & Address \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's Address (if different) \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Employer Name & Address \_\_\_\_\_

Siblings in Family - Please include name & age for all **AND** birthday for all **younger** siblings

Sibling 1: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Sibling 2: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Sibling 3: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Sibling 4: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Have other children in your family attended School on the Green? If yes, please list names and year(s) attended. \_\_\_\_\_  
\_\_\_\_\_

Is your child toilet trained? **YES** **NO** Comments: \_\_\_\_\_

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Does your child have any physical limitations? If so, describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any allergies? If so, describe: \_\_\_\_\_  
\_\_\_\_\_

**Enrollment Packet:** I'd like to receive my Enrollment Packet via  Email  US Mail

**Emergency Contact:**

Person other than a parent to be called in an emergency if a parent cannot be reached:

Name \_\_\_\_\_ Relation to Child \_\_\_\_\_ Phone \_\_\_\_\_

In case of emergency, if parent or family doctor cannot come, the School is hereby authorized to call the school physician for my child. I understand that I am responsible for the full tuition payment for the school year, unless we relocate out of town or my child is withdrawn at the suggestion of a physician or the School Director.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

*Submission of this form does not guarantee enrollment. Enrollment is determined on a first come, first served basis with siblings of alumni and currently enrolled students having the opportunity to register prior to open registration.*

## REGISTRATION SURVEY

*In order to help us make your child's preschool experience the best possible and prepare for the upcoming year, please fill out the following and return with your registration form. We value your input.*

### How did you hear about School on the Green (SOTG)?

Newspaper Sibling Attended Web Search Open House Recommendation (by whom?) Other

### Why did you select SOTG for your child?

Liked the Program Parent-Co-op structure Cost Facility Teachers Location

Other (why?)

### How often would you be able to volunteer during a school year for the following?

Chaperone a field trip 0 1 2 or more

Volunteer as a substitute 0 1 2 or more

Mystery Reader 0 1 2 or more

Play-dough Maker 0 1 2 or more

Book Club 0 1 2 or more

**Do you have a talent, special skill, profession, or activity that you'd like to share with your child's class? If so, please describe.**

**The children take many field trips throughout the year. Do you have a suggestion for a new field trip? If so, please provide information such as contact name, phone number, or location, if known.**

**As a non-profit, parent cooperative preschool, School on the Green is led by a Board of Directors made up of parents of students and other community members. Would you be interested in a position on the board of Directors?**

Yes No Not sure, I'd like to learn more

*If yes, which area(s) most interest you?*

Executive Committee (President, VP, Treasurer, Secretary)

Marketing Fundraising Events Licensing Governance

**Comments:**