



## TreeHouse Preschool Summer Program Registration Form

Child's Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Name of guardians: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Home Church: \_\_\_\_\_

Allergies or other medical conditions: \_\_\_\_\_

\_\_\_\_\_

In case of an emergency, contact: \_\_\_\_\_

Emergency contact phone number: \_\_\_\_\_

Relationship to the child: \_\_\_\_\_

### Statement of Consent:

All the information that has been provided by me, the legal guardian on this application, is believed to be 100% accurate. I give consent to The TreeHouse Preschool to obtain emergency medical care (ambulance fees and/or health care costs are the responsibility of the parent/guardian) as well as the trained staff to administer minor first-aid procedures when necessary.

Parents/Guardians are held responsible for Bethel Life and/or The TreeHouse Preschool property or equipment damaged by their child. The church/school does not assume any responsibility for lost items or broken toys that belong to their children.

The cost for this TreeHouse Preschool Summer program is a non-refundable \$75 fee. If the class is unable to reach the minimum requirement of 10 students, then you will receive a full refund and the program will not be offered.

I have reviewed this contract and I agree to abide by all of the procedures and conditions that are stated in this agreement.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_