

PRE-REGISTRATION APPLICATION
The Growing Stick

Name of Child		Date of Birth	
Address		Age	
City, State, Zip		Home Telephone #	
Enrollment Start Date		Circle One	Full Days $\frac{1}{2}$ Days M T W T H F
Parent/Guardian Name		Check One	<input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> single <input type="checkbox"/> other
Occupation		Cell #	
Name of Employer		Phone #	
Parent/Guardian Name		Check One	<input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> single <input type="checkbox"/> other
Occupation		Cell #	
Name of Employer		Phone #	
Siblings Names & Ages		E-mail Address	
Parent/Guardian Signature		E-mail Address	
		Date	
Class Choice (Please check your choice)			
Toddler	<input type="checkbox"/>		
Two Year Olds	<input type="checkbox"/> Younger	<input type="checkbox"/> Older	
Three Year Olds	<input type="checkbox"/> Younger	<input type="checkbox"/> Older	
Four Year Olds	<input type="checkbox"/> Younger	<input type="checkbox"/> Older	

After School Pick-Up			
<input type="checkbox"/> Rice (903) 262-2555 409 Carriage Dr. Tyler	<input type="checkbox"/> Andy Woods (903) 262-1280 809 Clyde Dr. Tyler		
<input type="checkbox"/> Cain (903) 839-5600 707 Hwy 110 North, Whthse	<input type="checkbox"/> Brown (903) 839-5610 104 Hwy 110 North, Whthse	<input type="checkbox"/> Higgins (903) 839-5580 309 Bascom Rd Whthse	

Previous Childcare (Check One)	
Relative <input type="checkbox"/>	Pre-School (Name):
Private Home Care <input type="checkbox"/>	
Nannie <input type="checkbox"/>	Daycare (Name):