



PCA Preschool 2023/2024

"Learning Through Play in a Faith Based Setting"

Prairie Christian Academy Preschool
 Box 68 - 411 11th Ave NE
 Three Hills, Alberta T0M 2A0
 Phone: 403-443-4220

Child's Information:

Last Name: _____ First Name: _____ Male Female

Preferred Name: _____ Birthdate: _____ / _____ / _____
Day Month Year

Home Address: _____
Street & Box # Town Province Postal Code

Applying for: Full Year: Only Fall: Only Winter: Only Spring:
 AM Class (Tues/Thurs 8:45-11:15) ~ Age 3-4
 PM Class (Tues/Thurs 1:00-3:30) ~ Age 4/Pre-kindergarten

Parent(s) Information:

Mother's Name: _____ Work Place: _____

Home Address: _____
Street & Box # Town Province Postal Code

Primary Phone #: _____ Secondary Phone #: _____ Email: _____

Father's Name: _____ Work Place: _____

Home Address: _____
Street & Box # Town Province Postal Code

Primary Phone #: _____ Secondary Phone #: _____ Email: _____

Additional LOCAL Emergency contact to whom child may be released:

Name: _____ Phone: _____

Home Address: _____
Street & Box # Town Province Postal Code





Medical Information:

AB Health #: _____

Physician: _____ Phone: _____

Immunizations up to Date? Yes No Long-term Medications: _____

Allergies/Medical Conditions/Diagnosis: _____

In the case of an emergency PCA Staff may transport my child to an emergency facility and/or administer First Aid: Yes No

Other:

If applicable, person(s) to whom your child may NOT be released: _____

Are you aware of the discipline policy of PCA Preschool? Yes No

Comments: _____

~ The names & photos of Preschool students participating in class projects or events may appear in Prairie Christian Academy publications or community promotions. ~

Please check one of the following:

- I grant permission for the use of my child's name/photo as described above.
- I DO NOT grant permission for the use of my child's name/photo as described above.

Would you like to schedule a meet & greet with the teachers and a have a chance to see the classroom before your child begins? Yes No

Date of Application: _____ Parent Signature: _____

Please return completed application to Christy Saunders pca.preschool@ghsd75.ca





Additional Information (Not Required):

As Early Childhood Educators, we strongly believe in early intervention in child development, so we have put together a few questions that we hope will help you in seeing if there are any areas of concern you might have regarding your child.

If we can help your child get the support they need at the earliest age possible, it can make a huge difference.

1. Do you have any concerns regarding your child's speech? _____

2. Describe any behaviours that are of concern to you. How do you deal with those behaviours at home?

3. Do you have any specific goals in mind for your child at preschool this year? _____

4. What are your child's strengths and interests? _____

5. Is there any other information that could help us gain a better understanding of your child? _____

6. Would you like to meet with us as teachers to discuss any of these concerns, so that we can get to know you and your child better and support your family in the best ways possible? Yes No

For Office Use Only:

Date Recieved: _____

Susbidy? Yes No

Fees Paid? Fall Winter Spring

