

## PCA Preschool 202512026

"Learning Through Play in a faith Based Setting"

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

## **Child's Information:**

Last Name:	me: First Name:				Male ☐ Female ☐	
Preferred Nam	e:		Birthdat	re:	/ / / Month	Year
Home Address	:					
	Street	PO	Box #	Town		Province Postal Code
Applying for:	Full Year: 🗌	Only Fall:  Only Win	ter: 🔲	Only Spri	ng:□	
	<del></del>	s (Tues/Thurs 8:45-11:15 s (Tues/Thurs 1:00-3:30)	•		ergarten	
<u>Parent(s) Inf</u>	ormation:					
Mother's Name	e:		Wo	rk Place:_		
Home Address	Street & Box #			Town	Province	Postal Code
Primary Phone		Secondary Phon				. 55.41 5545
Father's Name	::		_ Wo	rk Place:_		
Home Address						
710111071001	Street & Box #			Town	Province	Postal Code
Primary Phone	· # <u>:</u>	Secondary Pho	one #:_		Email:_	
LOCAL Emergency contact to whom your child may be released:						
Name:			_ Phor	ne:		
Home Address	Street & Box #		Town		Province	Postal Code

## **Medical Information:**



AB Health #:	
Physician: F	Phone:
Immunizations up to Date? Yes ☐ No ☐ Long-term Med	dications:
Allergies/Medical Conditions/Diagnosis:	
In the case of an emergency PCA Staff may transport my chadminister First Aid:  Yes  No	nild to an emergency facility and/or
Other:	
If applicable, person(s) to whom your child may <u>NOT</u> be rele	eased:
Are you aware of the discipline policy of PCA Preschool?	Yes □ No □
Comments:	
~ The names & photos of Preschool students partic may appear in Prairie Christian Academy publicat	
Please check one of the following:	
<ul> <li>☐ I grant permission for the use of my child's name</li> <li>☐ I DO NOT grant permission for the use of my child</li> </ul>	•
	·
Would you like to schedule a meet & greet with the teacher before your child begins? Yes \( \square\) No \( \square\)	rs and a have a chance to see the classroom
Date of Application: Parent Signature	e:

\*Please return completed application to  $\underline{\texttt{pca.preschool@ghsd75.ca}}^*$ 

## <u>Additional Information (Not Required):</u>



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?						

For Office Use Only:

Date Recieved:

Susbidy? Yes \( \text{No} \)

Fees Paid? Fall \( \text{Winter} \) Spring \( \text{Spring} \)



