

OLYMPIANS PRE SCHOOL

OPEN ENROLLMENT APPLICATION FORM

Student's Legal Name (Last Name, First Name, Middle Initial)		Birth Date:		20____ / 20____ School Year	
Student's Address (Number, Street, & Apt # or Lot #)			Age:	Gender	Ethnicity Hispanic: Y N Race:
City, State, Zip Code			Last School Attended:		
Mother's Name or Legal Guardian (Circle One)			Phone		
Father's Name or Legal Guardian (Circle One)			Phone		
Student Lives With:		Email Address			
Notes:		Please let us know how you heard about us, please circle one: Location Internet Family Times Magazine ValPak Other: _____ Referral; who: _____			
Sibling Preference					
Application Date:		Parent Signature:			
For School Use: Initial: _____	Date App Recvd	Accept Date:	Deny Date:	Wait list #:	Packet Rec'd: Reg. Fee Rec'd:
<p>*This form alone does not secure a spot in the VPK classroom. A complete VPK packet along with voucher and registration fee must be turned in to VPK Director guarantee your place. VPK packets can be picked up in front office or in the VPK classroom.</p>					