



TLC ADVENTURE PRESCHOOL

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—Registration Form—

What name would you and your child prefer us to use? _____

Child's full name _____ male female

Child's birthdate _____

Present address of child _____

Languages spoken in the home _____

Child's potty habits, transition and experience at home _____

Parent 1 Name _____

Parent 1 Address _____

Occupation _____ Business hours _____

Email address _____

Home phone _____ Work Phone _____

Mobile phone _____ Church membership _____

Parent 2 Name _____

Parent 2 Address _____

Occupation _____ Business hours _____

Email address _____

Home phone _____ Work Phone _____

Mobile phone _____ Church membership _____

For the safety and emotional needs of your child, please inform your child's preschool teacher of any significant family or lifestyle changes that may occur during the course of the school year.

Names and ages of brothers and sisters (give birthdates) _____

