

Pierz School Readiness Registration

Full Legal Name _____ Date of Birth _____ age _____

Early Childhood Screening date/district _____ completed scheduled

passed screening was referred at screening is in evaluation has active IEP
 I have concerns about my child's _____

Will you use transportation if available? yes no unsure yet

Pick up address _____ home daycare

Drop off address _____ home daycare

Indicate your 1st and 2nd choice for 2-day class session, runs from 8:10am - 3:05pm.

_____ Mon/Wed _____ Tues/Thurs _____ No Preference

_____ Based on the sliding scale, we will pay annually A \$900 B \$675 C \$450 D \$225

_____ I am paying the full amount with the 5% discount (\$ _____ x .95 = \$ _____)

_____ I am paying the nonrefundable deposit of \$25 and will make monthly payments.

_____ I am submitting a completed Pathway application to waive the deposit. I will make a payment in September if not approved for the scholarship.

Signature _____ Date _____ \$ _____ cash check credit

I give permission for my child to attend field trips that may be planned throughout the school year with the preschool program. There will be notices sent home before any field trip occurs.

Parent/Guardian Signature

Date

I give permission for photos taken of my child during preschool to be used on the Pierz District Website or Facebook page or local newspapers throughout the school year.

Parent/Guardian Signature

Date