

**Application for Admission 2024-2025  
Towson Presbyterian Preschool**

Child's Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_  
                    Number                    Street                    Town                    Zip

Preferred Email: \_\_\_\_\_

Parent/Guardian Name 1: \_\_\_\_\_

Address if different from child: \_\_\_\_\_

Cell Phone Parent/Guardian 1: \_\_\_\_\_

Parent/Guardian Name 2: \_\_\_\_\_

Address if different from child: \_\_\_\_\_

Cell Phone Parent/Guardian 2: \_\_\_\_\_

Please note if you have priority status:

- \_\_\_\_\_ member Towson Presbyterian Church
- \_\_\_\_\_ currently enrolled
- \_\_\_\_\_ child previously enrolled (Child's Name: \_\_\_\_\_)

Does your child have an IFSP or an IEP: Yes/No (circle one)

**Please select the preschool program for your child's enrollment below:**

• ***Morning Preschool Program:***

4 Year Old	3 Year Old	2 Year Old
_____ 5 mornings/week	_____ 5 mornings/week	_____ 5 mornings/week
	_____ 3 mornings/week	_____ 3 mornings/week
		_____ 2 mornings/week

Do you plan to use Parent's Day Out on a regular basis? Yes/No (Circle one)

• ***Morning Preschool Program with Extended Day:***

4 Year Old	3 Year Old	2 Year Old
_____ 5 full days/week	_____ 5 full days/week	_____ 5 full days/week
	_____ 3 full days/week	_____ 3 full days/week
		_____ 2 full days/week

**A \$100 registration fee must accompany each application. This amount is in addition to the tuition and is not refunded after the application has been accepted. Please make checks payable to Towson Presbyterian Preschool.**

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_