Application for Admission 2027-2028
Towson Presbyterian Preschool

Child's Name: _____ Preferred Name: _____

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: _____)

School programs child has attended:

Does the child have any food allergies and/or health conditions which would require medical treatment or supervision during the day?

Has the applicant consulted with a physician or other professional regarding physical, emotional or academic development of the child?

Please attach any school reports, conference forms, psychoeducational reports, IEPS, IFSP, or 504 plans

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

- ***Morning Preschool Program*:**

PreK	3 Year Old	2 Year Old
_____5 mornings/week	_____5 mornings/week	_____5 mornings/week
	_____3 mornings/week	_____3 mornings/week
		_____2 mornings/week

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

PreK	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: _____