

BEVERLY HEIGHTS CHRISTIAN PRESCHOOL

1207 Washington Road
Mt. Lebanon, PA 15228
(412) 561-7200

Registration/Information Form 2010-11

Date_____
Class_____
Check #_____

A \$35 non-refundable registration fee must accompany this form.
(\$15 non-refundable registration fee for Parent-Twos)

Please specify class:

- Parent-Twos (Thursdays, 9:30-11:00 a.m.)_____
- Tues/Thurs a.m. class _____ Tues/Thurs p.m. class_____
- (child must be 3 by September 1, 2010)
- Monday/Wed./Friday-a.m. (child must be 4 by September 1, 2010)_____
- T-class for 4-year-olds (child must be 5 by February 1, 2011)_____
- A.M. Kindergarten Enrichment Class ___Monday___Friday___both days_____
- P.M. Kindergarten Enrichment Class___Monday___Friday___both days_____

School where child attends kindergarten_____

(minimum enrollment requirement for each class)

Date_____

Child would like to be called_____

(name will be used on all nametags)

Child's name_____ Gender_____ Birthdate_____

Address_____ Zip Code_____

Telephone_____ Email address_____

Name of Mother or Guardian_____ Cell phone_____

Mother's occupation_____ Work Phone_____

Name of Father or Guardian_____ Cell Phone_____

Father's occupation_____ Work Phone_____

With whom does the child reside?_____

If there are special circumstances or concerns regarding your child's living situation, please explain_____

List siblings and their ages (and any other members of the household)_____

(over)

Are you a member of a church? _____ Which one? _____

Does your child have any food or other allergies? _____ Please describe. _____

Are there are foods or drinks your child should not have? _____

Does your child take any regular medications? _____ Which ones? _____

Does your child have any problems with vision or hearing? _____ If so, please explain. _____

Does your child have any special needs that may require special attention in the classroom? (medical, physical or behavioral) _____

** If your child has special needs, we will require a visit with you and your child in order to determine the appropriateness of our program for your child.*

Is your child currently receiving therapy? (speech therapy, occupational therapy, etc.) _____

** We limit the number of professionals in each class.*

Is any language other than English spoken at home? _____ If so, which one(s)? _____

Is this your child's first group experience? _____ If not, please describe his/her other experiences. _____

What are your child's favorite activities? _____

Do you have any concerns for your child that the teachers should know about so that we can better help your child transition into our preschool? If so, please explain. _____

How did you learn about our preschool? _____

(answer these questions for the TuTh, MWF and Older-4s class)

Would you be available to help with any of the following class activities?

_____ participate in field trips

_____ come into the class and tell the children about your job
in the month of March

_____ substitute for absent teacher (no more than once a year)

(Limited partial scholarships are available. Applications due by May 31, 2010. Call preschool for application.)

Readiness Guidelines
Beverly Heights Christian Preschool
for the 3 and 4 year old classes

The goal of Beverly Heights Christian Preschool is to provide a loving God filled, safe, educational and fun environment for each child in our preschool. We accomplish this through a structured curriculum that has been created with age-appropriate goals in mind.

In determining whether our program is an appropriate fit for your child, please consider these behavioral guidelines that we will be striving toward in the 3 and 4 year old programs.

By the end of September, a child will be able to meet most of these criteria as is appropriate for their specific class:

- sit on a chair during circle
(2 minutes for 3 year olds, and 5 minutes for 4 year olds)
- follow simple directions
- sit and listen to a story in a group
- transition from one activity to another
- demonstrate respect for children and teachers
- understand and follow classroom rules
- independently use the toilet for all bathroom needs.

If the director decides during the first month that a child is not ready to fully participate in the preschool program, then it may be necessary for the child to withdraw from the program. If there is a space, the child's readiness may be re-evaluated in January.

It is expected that children will be potty-trained and in standard underpants by September. We also expect that each child will be able to take care of toilet needs. Please notify us if your child is not trained by July.

Please sign below indicating that you have read and understood the preceding paragraph.
