CHESTER CO-OP PRESCHOOL ~ REGISTRATION APPLICATION

Child's Name_____ Date of Birth_____
Last First MI

Nickname (optional) _____ Age as of Sept 30th _____
Yrs & mths

Address_____
Street City Zip

Who should we thank for referring you to our school _____

- New members only

Class for which your child is being registered:

[ ] **2 - Day** (2 ½- 3 yr. olds) Thursday & Friday Mornings ~ 9:00am to 11:00am
[ ] **3 - Day** (3 & 4 yr. olds) Mon, Tues, & Wed Mornings ~ 9:00 to 11:15am
[ ] **Pre-K** (4 & 5 yr. olds) Mon, Tues, Wed, & Thurs. ~ 11:30 am to 2:15pm

Father/Guardian's Name _____
Address _____ Home Phone _____
Cell Phone _____ E-Mail_____

Mother/Guardian's Name _____
Address _____ Home Phone _____
Cell Phone _____ E-Mail _____

Family Information:
Do both parents live with child? _____ If not, which parent does? _____
Siblings' names and dates of birth _____
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DESCRIPTION OF COOPERATIVE PRESCHOOL AND PHILOSOPHY

By joining a cooperative preschool, you are expressing a desire to share in your child's preschool experience. Each member of a cooperative has the opportunity and responsibility to learn more about his/her own preschooler and other children the same age. As a member of a cooperative, you also have the responsibility to participate in its business and daily operations. In the cooperative preschool, the teacher and parent together are responsible for the total educational program of the school.

Through observation and study of preschool children and their innate need for growth and development, parents and teachers cooperate to provide an environment conducive to this end.

The teaching and administration of the program is planned to permit attention to each as an individual. The variety of talents of teachers and parents enrich the sessions as they moved through the seasons of the year with emphasis on celebration of special occasions of our culture and heritage.

As the children are inspired to learn through play, they acquire self-confidence and the ability to remain at self-appointed tasks. Ultimately, they are freed from early fears and become ready to participate in new learning situations, each according to his/her development.

I have read and understand the philosophy of Chester Cooperative Preschool.

_____
Signature Date

A NON-REFUNDABLE FEE of $25.00 payable to Chester Co-op Preschool *must* accompany this application. Please return this form by _____ to:

Chester Co-Op Preschool ~~ Attn: Vice-President
12772 Chillicothe Road, Chesterland, Ohio 44026

Chester Cooperative Preschool does not discriminate on the basis of sex, race, religion, or national origin.