

Registration Form 2026-2027



PERSONAL INFORMATION

Preschool On The Creek Campus: Green Oaks Mira Lagos

Child's Full Name: _____ Date of Birth _____ / _____ / _____

Nickname/Name Child Goes By (if different): _____

Home Address: _____ City: _____ Zip: _____

Home Phone #: _____ E-mail address: _____

Gender: Male Female Child's age on **September 1, 2026:** _____

Mother's Name: _____ Father's Name: _____

Employer: _____ Employer: _____

Occupation: _____ Occupation: _____

Work #: _____ Work #: _____

Cell #: _____ Cell #: _____

Marital Status: Married Divorced Single Separated Widowed

**If there are special concerns/directions regarding custody, please notify the director.*

EMERGENCY INFORMATION

In case of emergency, notify those below if unable to contact parents/guardian (*State Standard requires two*):

1. _____
Name (& Relationship) Full Address Phone #

2. _____
Name (& Relationship) Full Address Phone #

PICK UP AUTHORIZATION

The following people may pick up my child **in addition to the parents and emergency contacts** listed above.

They must bring in ID and be placed in Brightwheel by the parents.

Names

Phone Numbers

1. _____

2. _____

3. _____

AUTHORIZATION FOR MEDICAL CARE

In the event I cannot be reached to make arrangements for emergency medical care at the time of an illness/accident, I hereby authorize the POTC Director or her representative to take my child to:

Name of Hospital

Insurance Company: _____ Policy #: _____

SPECIAL NEEDS STATEMENT

Allergies: _____

Existing illness: _____

Previous serious illness/injury: _____

Medicine prescribed for long term continuous use: _____

My child has been examined by _____, a licensed physician, within the last 12 months and is able to participate in the program.

PHOTO/VIDEO RELEASE

I give my permission for _____ to be photographed/video taped in the school setting. These would be used in program slide shows, craft projects or for display around our building.

PARENT HANDBOOK

I understand the policies and procedures in which POTC practices.

I agree to place my child, _____, in the care of POTC under the policies and procedures listed in the POTC Parent Handbook. I have read the 2026-2027 Preschool On The Creek Parent Handbook. I will retain this manual for my records, if any further questions arise.

Please read and sign below to acknowledge: I agree to all requirements of the enrollment process and to all releases included in this form with the exception of those I have noted.

Parent Signature (either parent may sign/both signatures not required) Date

Preschool On The Creek Director Signature Date