

# Ross Recreation Preschool Application

P.O. Box 117 Ross, CA 94957 (415)453-6020 fax (415) 453-2014

**Please complete this form and return to Ross Recreation  
with a \$25 processing fee.  
Thank you**

Child's Name: \_\_\_\_\_

Child's Birthdate: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Work / Cell: \_\_\_\_\_

Father's name \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Work / Cell: \_\_\_\_\_

Mother's email address: \_\_\_\_\_

Father's email address: \_\_\_\_\_

Tell us about your child: (i.e. likes, dislikes, temperament, previous school experiences, etc.)

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Siblings: \_\_\_\_\_ If so, names and ages: \_\_\_\_\_

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Did any of them attend Ross Rec. Preschool? \_\_\_\_\_

Years attended: \_\_\_\_\_

Days preferred: (please circle) M, W, F, or T, Th or all 5 days.

Year you'd like your child to begin Preschool (child must be 3 years old and potty trained by Oct. 1 of the year entering school): September \_\_\_\_\_

Would you be interested in After School Care (1-3p.m.) \_\_\_\_\_

If yes, which days: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Application date: \_\_\_\_\_

Received Date: \_\_\_\_\_

Acceptance date: \_\_\_\_\_

Deposit Received: \_\_\_\_\_