

CRIEVE HALL CHURCH OF CHRIST PRESCHOOL  
SUMMER REGISTRATION 2022

4806 TROUSDALE DR. 37220

615.833.5395

FAX#615.515.1299

Welcome to the Crieve Hall Summer Program. **Please fill out the front and back of this form**

The summer program will be Tuesday, June 7<sup>th</sup> – Thursday, July 14<sup>th</sup>. This will be a six week long summer fun program. We will accept children 2 years old through 5 years old going into Kindergarten. Only children enrolled for our fall school year will be eligible to enroll for our summer program. We are not open to public use during the summer.

6 weeks Tuesday and Thursday: \$400.00

Registration and Supply fee for the summer is \$50.00 total. These fees are non-refundable. The fees reserve your child's space. **Payment for the summer session is due Tuesday, June 7<sup>th</sup>.**

In the case of absence from school during the summer, please notify through the brightwheel app. This allows the teacher to prepare for the day. Being absent from school does not reduce the tuition.

Please sign your child in by scanning the QR code given to you on the car rider tag. We use sign up genius to ensure we have the staffing available for early/late class. Please make sure to sign up your child the day before using early/late class. Early class is from 8:30-9:25 and late class is from 2:40 – 3:30. Each time you use early/late class, it is \$8.00 per use (**\$1.00 for each minute after 3:30**).

Each day will consist of outdoor play (weather permitting), Bible story, art/crafts activity, and lots of summer fun!!

Be sure to label everything your child brings to school. This includes lunchbox, sippy cups, clothing, and blankets. A change of clothes must be left at school in case of accidents. We will provide a large school backpack to hold all the items needed for school each day.

We furnish snack, which can be goldfish, animal crackers, vanilla wafers, or crackers. Milk, juice, and water are provided. Please send your child a lunch each day. Lunches are not refrigerated nor will they be microwaved, so please pack accordingly. Label lunchboxes and all plastic containers.

**Please do not bring your child to school if he/she has been sick with fever, rash, vomiting, or diarrhea in the past 48 hours. Parents will be contacted if their child becomes sick during school hours. We do not administer medicine.**

Thank you for sharing your child with us at Crieve Hall Preschool!

I understand and agree with the above statements.

Signature of Parents/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Registration /Supply paid Check# \_\_\_\_\_

CRIEVE HALL CHURCH OF CHRIST PRESCHOOL  
SUMMER REGISTRATION 2022

4806 TROUSDALE DR. 37220

615.833.5395

FAX#615.515.1299

Child's name: \_\_\_\_\_ Child's birthdate: \_\_\_\_\_

**Children enrolling in the 3 year old and 4 year old classes MUST to be potty trained!**

Are there any medical problems, allergies, or other information we need to know about concerning your child? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please give details:

\_\_\_\_\_

List medications child is on: \_\_\_\_\_

\_\_\_\_\_

**Parents/Guardians:**

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's Cell #: \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

Mother's Email: (PLEASE PRINT) \_\_\_\_\_

Father's email: (PLEASE PRINT) \_\_\_\_\_

Church attended: \_\_\_\_\_

**Emergency Information:**

Name of person authorized to act for the parent (if unreachable) in case of an emergency:

\_\_\_\_\_

Cell #: \_\_\_\_\_

Physicians name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Hospital of choice: \_\_\_\_\_

To ensure the safety of your child, please list all other adults to whom your child may be released or who are authorized to provide transportation for your child:

\_\_\_\_\_

Any other information we need to know: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CRIEVE HALL CHURCH OF CHRIST PRESCHOOL

SUMMER REGISTRATION 2022

4806 TROUSDALE DR. 37220

615.833.5395

FAX#615.515.1299

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Help us get to know your child.

**Personal care:**

~ Uses toilet: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Washes hands: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Feeds themselves: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Puts on shoes: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Pulls up pants after the restroom: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

**Language:**

~ Uses words to express thoughts and needs: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Speaks clearly: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Speaks in complete sentences: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

**Cognitive Development:**

~ Sustains attention in small groups: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Sustains attention in large groups: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Grasps concepts: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Follow 2-3 step instructions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Speaks first name when asked: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Speaks last name when asked: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Shares age when asked: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Can count: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Can describe what is seen in a picture: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Responds to yes or no questions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

**Physical Development:**

~ Fine Motor control: pull up pants, hold crayon/pencil correctly, uses hands well:

\_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

CRIEVE HALL CHURCH OF CHRIST PRESCHOOL  
SUMMER REGISTRATION 2022

4806 TROUSDALE DR. 37220

615.833.5395

FAX#615.515.1299

~ Gross Motor control: runs, skips, throws balls, uses arms and legs well:

\_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

**Social and Emotional Development:**

~ Listens: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Cooperates: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Relates to peers: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Relates to adults: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Exhibits self-confidence: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Adjust to transitions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Tolerates frustrations: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Separates from parents: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Shares materials and possessions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Functions independently: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Asks for help when needed: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Demonstrated self-control: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Accepts when things do not go his or her way: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Difficulty sustaining attention: \_\_\_ area of concern. \_\_\_ age appropriate \_\_\_ area of strength

~ Disruptive in class: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Difficulty following directions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Functions well with distractions: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Works/Plays well with others: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

~ Seeks attention from peers or teachers: \_\_\_ area of concern. \_\_\_ age appropriate \_\_\_ area of strength

~ Follows a routine: \_\_\_ area of concern \_\_\_ age appropriate \_\_\_ area of strength

**Comments:**