Medicine Lake Preschool Enrollment Application 2021-2022

Student's name:
Date of birth:
Parent/Guardian Name(s):
Mailing address:
Phone: Home: Work: Cell:
How will your child be arriving at school?
Who will be responsible for picking up your child? Please list all individuals and corresponding phone numbers. Children will only be released to those with written permission.
List any food allergies you are aware of at this time.
List any medical conditions/ concerns you may have.

Please provide the school with a copy of a birth certificate and a current immunization record.

Medicine Lake Public School PO Box 265 311 Young Street Medicine Lake, MT 59247

Phone (406)789-2211

\$15 half day \$30 full day

Students must be enrolled in preschool, no drop in's.

Must be potty trained.

Students are allowed to attend 1-4 days a week, however we would like a set schedule for which days the student will be attending.