

Fifth Avenue Baptist Nursery and Preschool
1135 5th Avenue
Huntington, WV 25701
Office 304-525-5441 Fax 304-697-8469

Initial Registration Form

Please fill out completely

Application Fee: \$25 (non-refundable)

See Handbook for details on fees.

*Please note that the application will not be considered until application fee is paid.

Forms needed before the child's first day:

Initial Registration Form	Paid Application Fee
Two Notarized Emergency Cards	Pick Up Authorization Form
Signed Payment Contract	Immunization Record
Current Health Check/Wellness Check	

For Office Use:

Date Filed: _____

Date Enrolled: _____

Application Fee received: Yes No

Child's Name: _____ Birthdate/Due Date: _____

Complete Address: _____ Male or Female (Please circle one)

Expected date that you will need care: _____

Parent/Guardian Information:

Name: _____ Email (Optional): _____

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Complete Work Address: _____

Parent/Guardian Information:

Name: _____ Email (Optional): _____

Home Phone: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Complete Work Address: _____

Child Information:

Please List Known Allergies: _____

History of serious illness or injury? ____ If yes please list: _____

Recent stressful experiences? ____ If yes please describe: _____

Has your child attended another child care facility? ____ If yes please list: _____

_____ May we contact them? Yes No

Does your family have a home church? Yes No

Please use the back of this sheet to give any other pertinent information about your child. Information that we should consider in placing your child, or that a teacher may find helpful in getting to know your child. (e.g. fears, expressions of anger, discipline methods used at home, eating habits, special needs)

Signature of Parent/Guardian(s): _____ Date: _____