

# S.T.A.R. Application Form 2020 - 2021

February 27th, 2019 Acceptances will be sent out, starting at 2:00pm by email.

Please consider my child for enrollment in: (You may mark more than one location)

STAR Preschool at PLC (Child is potty trained and age is between 3 year - 4.5 year old) \_\_\_\_\_

STAR Little Dippers at PLC (This class is meant for children who will be entering kinder the following year.) \_\_\_\_\_

STAR Little Dippers at Marquez (This class is meant for children who will be entering kinder the following year.) \_\_\_\_\_

STUDENT'S NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ MALE/FEMALE (please circle)

GUARDIAN 1 NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_ WORK PHONE \_\_\_\_\_

GUARDIAN 2 NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_ WORK PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ (This will be main email used for contact.)

HAVE YOUR CHILDREN ATTENDED THE STAR PROGRAM BEFORE Y N

If yes name location \_\_\_\_\_

HAVE YOUR CHILDREN ATTENDED PLP OR PLC BEFORE Y N

NAME OF KINDERGARTEN YOU PLAN TO ATTEND \_\_\_\_\_

NAME OF OTHER PRESCHOOL ATTENDED: \_\_\_\_\_

HOW DID YOU HERE ABOUT OUR SCHOOL: \_\_\_\_\_

Anything you would like us to know about your child

\_\_\_\_\_

Attached is: A personal check for the \$65.00 (non-refundable) registration fee

\* (Payable to STAR PLC)

For office use only: Date \_\_\_\_\_ Amt \$ \_\_\_\_\_ Ck # \_\_\_\_\_

