



Play Café: A Modern Twist on Mother's Morning Out First Presbyterian Church Preschool

1169 Clark Street SW, Covington, GA 30014 | 770.786.7321

2022-2023 REGISTRATION APPLICATION

Child's Name _____ Preferred Name _____

Gender _____ Date of Birth (or due date) _____ Age on 8/1/22 _____

Legal Guardian Name #1 _____ Home Phone _____

Mobile Phone: _____ Work Phone: _____

Employed by _____ Profession: _____

E-mail Address: _____

Legal Guardian Name #2 _____ Home Phone _____

Mobile Phone: _____ Work Phone: _____

Employed by _____ Profession: _____

E-mail Address: _____

Names and ages of other children _____

Home Address _____ City _____ Zip _____

Mailing Address (if different) _____

Family Church _____

If not already a member, are you interested in learning about FPC? Yes ___ No ___

Physician's Name _____ Phone _____

Insurance Company: _____ Policy number: _____

Do we have permission to contact physician if we cannot reach parents? _____

Please list any current or past health issues that require special attention:

Condition	Please indicate Suspected or Diagnosed	Treatment/Comments
Allergies		
Medical		
Developmental		
Other		

First Presbyterian Preschool Staff may release health information about my child to*:

Name	Relation to Child	Phone Number
1.		
2.		
3.		

*We are unable to provide even basic information (i.e. fever, rash) to anyone not listed above.

The following people are authorized to pick-up my child from Preschool:

Name	Relation to Child	Phone Number
1.		
2.		
3.		
4.		
5.		

Photo Waiver: Do you grant permission to Play Café and First Presbyterian Church of Covington to use photos of your child participating in Play Café activities for advertising or promotional materials in print or on the website? Yes ___ No ___

Play Café Tuition

Monthly rate: Tuesdays and Thursdays, 9:00am – 1:00pm

Per 3 – 18 months old child

\$175 per month

Registration fee

\$0

By signing below, I certify that all information provided is correct to the best of my knowledge.

Signature _____

Date: _____

Helpful Information:

Please tell us more about your child including likes, dislikes, fears, pets, and comfort items, etc. so that we may make your child feel as "at home" as possible _____

What do you hope your child will gain from this school? _____

Please share any family traditions, cultural considerations, or religious beliefs that will help us better serve your family: _____

Please tell us more about YOU! Would you like to participate in "morning out" activities and get to know other parents while your child is at Play Café? (check as many as you'd like)

Yes, for physical activities (ex: run club) ___ Yes, for mental activities (ex: book club) ___

Yes, for other activities ___ Not during Play Café but in the evenings ___

No, I will be at work ___ No, for another reason _____

Please mark any activities you may be interested in doing/discussing with other parents:

Walking Running Yoga Dancing Sports Meditation

Books Movies TV Shows Fantasy Sports Crafting

Cooking/Baking Painting/Drawing Board/Card Games Parenting Classes

Other _____