

# 2019-2020 REGISTRATION FORM

## Peninsula Pre-Three Cooperative



Your child is registered when we receive the following:

1. Registration form completed and signed on the back
2. \$40 Registration Fee
3. Immunization form completed and signed

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Sex \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address, City, Zip \_\_\_\_\_

Email Address (for pre-3 communication only) \_\_\_\_\_

The Pre-Three Cooperative distributes a membership list to all members. May we share your mailing address, phone number, and email address with other members?  Yes  No

Siblings and Ages \_\_\_\_\_

Who will be attending class with your child? If different than above, please include Name and Phone.

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**ENROLLMENT INFORMATION:** Your child's age on the date classes begin determines which class you should attend. Children should not yet be 3 ½ on September 1st to be eligible for Pre-3. Final decisions on class distributions are made by the Pre-3 Board. **Classes begin September 10, 2019. Classes are subject to cancellation if enrollment warrants**

- TUESDAY CLASS - 9:30 to 11:30 am: 10 months - 2 years
- WEDNESDAY CLASS - 9:30 to 11:30 am: 18 months - 3 ½ years
- THURSDAY EVENING CLASS - 5:30 to 7:00 pm: 10 months - 3 ½ years (MIXED AGE CLASS)

Quarterly tuition is \$115 for Tuesday or Wednesday class, or \$90 for Thursday PM. Enrolled siblings are charged 50% tuition for the second child. A one-time registration fee of \$40 per year must be submitted with this form at the time of registration (\$10 for each additional sibling). Payment is required at the start of each quarter (3 times per year). Tuition scholarships are available. The registration fee is not refundable. Parents enrolled in the Pre-Three Cooperative receive Peninsula College credit for their participation. Payment can be made by check, money order or ACH/bill pay. Please make checks payable to Peninsula Pre-Three Co-op and send completed registration form, fee, and immunization form to the address below. Classes fill quickly.

Peninsula Pre-Three Cooperative  
PO BOX 876, Port Angeles, WA 98362  
Email: [peninsulaprethreethree@gmail.com](mailto:peninsulaprethreethree@gmail.com) Phone: 360.207.5663  
<http://www.pencol.edu/file/peninsula-pre-three-cooperative-pa>  
<http://www.facebook.com/peninsulapre3>

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### EMERGENCY HEALTH INFORMATION:

Child's Name \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_ Address \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Does your child have any allergies or health issues? Please specify.

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**Immunizations are current** - An immunization record must be on file with the Co-op prior to the first day of class. Children without this document on file forfeit their spot and will not be able to attend class. If immunizations are not current, please explain.

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### PARENT EDUCATION AGREEMENT

As a participating student/parent in the Family Life Education Program affiliated with Peninsula College, I agree to fulfill the responsibilities listed below:

- To pay the registration fee of \$40.00 (\$10 for each additional child)
- To pay tuition by the second class of each quarter; a **\$10.00 late fee** will be assessed if tuition is late (unless prior arrangements are made)
- To notify the Membership Coordinator and the Treasurer two weeks before leaving the Co-op, making sure tuition is paid in full
- To support and participate in the Co-op's fundraising activities
- To come to class once a week with my child
- To participate as "working parent" on a rotating basis as required
- To attend two parent enrichment sessions outside of class per quarter
- To serve on a Co-op committee or hold a leadership position in the Co-op
- To participate in the decision making and evaluation process for the child and parent programs
- To bring my child to class only if he/she is well
- To provide a substitute adult if I cannot attend class with my child and to notify the Teacher
- To abide by the policies and by-laws of the Pre-Three Cooperative
- To enjoy myself, my child, and others

**I give permission for my child to be photographed in scheduled preschool activities (optional)** Such photographs may include names and may be used by the Cooperative for publicity (newspaper, Facebook, brochures, etc.) or educational purposes.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about Pre 3? \_\_\_\_\_