



FAIRVILLE FRIENDS SCHOOL, INC.

PRESCHOOL  
PRE-REGISTRATION FORM

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

Current Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Gender \_\_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School District \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

Are you a member of a Friends Meeting? Yes No If so, which Meeting? \_\_\_\_\_

DESIRED ENTRY DATE: (please check one) September 2022 \_\_\_\_\_

September 2023 \_\_\_\_\_

**Please Choose Your Desired Schedule  
(Please rank all acceptable choices)**

**Morning Session, 8:30 – 12:15, including am snack & lunch**

\_\_\_\_\_ Mondays through Fridays (3 years old and up)

\_\_\_\_\_ Mondays, Wednesdays, Fridays

\_\_\_\_\_ Tuesdays, Thursdays

Please indicate if interested in afternoon preschool (considering adding in 2022) if your desired morning schedule is not available: \_\_\_\_\_

**Please return this signed Pre-Registration Form and  
enclose a non-refundable \$25 Pre-Registration Fee made out to Fairville Friends School.**

PARENT'S SIGNATURE \_\_\_\_\_