

Newport Center United Methodist Preschool

School Year 2024-2025

Today's Date:	Family #:	
Child's Full Name:	Anticipated Start Date:	
Nickname:	Gender: M / F AGE:	DOB:
Current Address:	City of Birth:	
City:	State:	Zip Code:
Has this address changed in past year? Yes or No		
Marital Status: M S SEP. DIV. WID Child resides with:		
Father's Full Name:		
Current Address:		
City	State:	ZIP Code:
Home Phone:	ne: Cell Phone:	
Email:		
ployed by: WK Phone:		
Mother's Full Name:		
Current Address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	
Email:		
Employed by:	WK Phone:	
Religious preference/Home Church		
How did you hear about our school?		