



Country Knolls Preschool

100 Myrtle Avenue Mahopac, NY 10541

\$100.00 APPLICATION FEE
Non-refundable.
Check# _____
Amount _____
Date: _____

2019/2020 PRESCHOOL APPLICATION

M-F full day ___ half day ___ (AM/PM) or MWF full day ___ half day ___ (AM/PM)

or T/TH full day ___ half day ___ (AM/PM) After/before school _____

STUDENT INFORMATION

First Name _____ Last Name _____

Date of Birth _____ Age _____ Gender _____

Address _____

City _____ State _____ Zip _____

Home Phone Number _____ E-mail _____

PARENT'S INFORMATION

Father's Name _____ Mother's Name _____

Employer _____ Employer _____

Position _____ Position _____

Work # _____ Work # _____

Cell# _____ Cell # _____

Emergency Contact # _____ Name & Relationship _____

Emergency Contact # _____ Name & Relationship _____

MEDICAL INFORMATION

Student's Physician _____ Physician's# _____

Any Physical Impairments or Allergies we should know about:

Can we take your child's picture for our social media/newspaper ___YES ___No

Email: sue@countryknollspreschool.com Phone: 845.520.7408 Website: www.countryknollspreschool.com