

Today's date: ___/___/___

(Application Processed by: _____ on ___/___/___)

2020-2021 School Year Application

BEGINNINGS PRESCHOOL AND CHILD CARE

Child's First Name: _____ Middle: _____ Last: _____

Name child is called: _____ Child's Date of Birth: ___/___/___ Child's age on 8/1/20: _____

Primary language: _____ Race/Ethnicity: _____

Allergies: _____

Class (please circle one): Infants Young Ones Older Ones Twos Preschool (ages 3-5)

Start Date (please circle one): Summer (5/27/20) Fall (8/3/20) Other: _____ (please see Director)

SUMMER Days/Times

FALL Days/Times

M-F 7:30-5:30

M-F 7:30-5:30

Summer Dates:

Fall Dates:

Start: Wed. May 27

Start: Thurs. Aug. 3

End: Fri. July 24

End: Thurs. May 27

Closed:

Closed:

Friday, July 3

please see calendar

Fees (for Beginnings Office Use Only)

Application/Process fee: \$140 _____pd.
Summer Program Fee: \$50 _____pd.

*Fees will be collected via Tuition Express unless other arrangements are made with the office staff. Fees are non-refundable and due at the time of application submission.

First and last name of parent/guardian (circle which): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Cell phone: (____) ____ - _____ Work phone: (____) ____ - _____ Home phone: (____) ____ - _____

E-mail address: _____

First and last name of parent/guardian (circle which): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Cell phone: (____) ____ - _____ Work phone: (____) ____ - _____ Home phone: (____) ____ - _____

E-mail address: _____

Physician's name: _____ Phone: (____) ____ - _____

Emergency contacts (to whom your child may be released; in addition to those listed above):

Name: _____ Relationship: _____ Phone: (____) ____ - _____

Name: _____ Relationship: _____ Phone: (____) ____ - _____

Name: _____ Relationship: _____ Phone: (____) ____ - _____

Is there anyone to whom your child should NOT be released? Yes No

Name(s): _____

Parent/Guardian Signature: _____

Date: _____

PLEASE FLIP OVER AND INITIAL ON BACK



BEGINNINGS FIRST BAPTIST CHURCH OF INDIANAPOLIS
8600 N. COLLEGE AVE. INDIANAPOLIS, IN 46240 317-574-6454 WWW.FBCINDY.ORG

How did you hear about Beginnings? currently enrolled family
 recommended by a friend or family
 you are a current member of FBC
 drive by
 child care finder website
 other: _____

Would you like more information about First Baptist Church?

Yes No

If yes, what is the best way for you to receive information?

Do you need assistance in providing your child a car seat? Yes No

Beginnings Release Form

(please initial)

_____ I give permission for First Baptist Church and Beginnings Preschool to use my child's photo, video, and/or audio tape recordings for marketing and/or historic purposes. I understand that my child's photo may be used on the Beginnings/FBC website, other social media platforms and/or other official printed publications (your child's name and age will not be used).

_____ I give permission for First Baptist Church and Beginnings Preschool to use my child's photo, video, and/or audio tape recordings for classroom purposes (pictures within the classroom, artwork in the hallway, etc.)

_____ I give permission for the following information to be placed in the family directory: Child's Name, Parents Name(s), Email, Phone Number

_____ I understand that any medication, lotions, chap stick, etc. MUST be given to my child's teacher before I leave the building.

_____ Daily Field Trips: I understand that my child may be taking daily walking field trips with his/her class around the First Baptist campus, but outside of the Beginnings program area. These include but are not limited to: the little and big playgrounds; Beginnings and church gardens; gym; baseball fields; creek and wooded areas; sanctuary and parlor.

_____ I give permission for my child to have sunscreen applied before going outside (Beginnings provides Equate Sunscreen SPF 50; other types of sunscreen must be provided by child's family).

*please initial on the lines above; if you have any questions, please see the Director.