

2921 Illinois Road
 Wilmette, IL 60091
 www.avoca37.org
 847•728•4142
 847•251•7742 Fax



2017-2018 Avoca Community Preschool Registration Form

STUDENT INFORMATION

Student's Legal Name

Last

First

Middle

Street Address:

City:

Zip:

Birthdate:

Month / Day / Year

Sex:

Male

Female

Age as of 9/1/17:

Home Telephone:

Cellular Number:

E-mail address:

PARENTS AND/OR GUARDIANS

Father's Name:

Mailing Address (if different):

Phone #: During:

School ~

Evening ~

Cell ~

Lives with Student

Yes

No

Father's e-mail address:

Mother's Name:

Mailing Address (if different):

Phone #: During:

School ~

Evening ~

Cell ~

Lives with Student

Yes

No

Mother's e-mail address:

Guardian Name:

Mailing Address (if different):

Phone #: During:

School ~

Evening ~

Cell ~

Lives with Student

Yes

No

Language spoken in the home:

EMERGENCY CONTACT

In case of emergency or school closure, please provide us with names, addresses and phone numbers of contacts if the school cannot contact you.

Contacts	Name	Address	Phone #
Emergency #1			
Emergency #2			

