

2019-20 BERRY PATCH REGISTRATION

Please fill out one form per child and include \$80. registration fee.
(\$50. for each additional child)



CHILD'S FULL NAME _____ Preferred Name: _____

AGE (as of Sept 1) _____ BIRTHDATE _____

PARENT(S) _____

ADDRESS _____

CITY _____ ZIP _____ HOME PHONE _____

CELL PHONE _____ PRIMARY EMAIL ADDRESS: _____

HOW DID YOU HEAR ABOUT THE BERRY PATCH? (Please indicate.)

- I am a current family You were referred to me by:
 I am a previous family _____
 I found you through an Internet search Other: _____

Permissions below and registration on reverse. PLEASE COMPLETE BOTH SIDES OF THIS FORM. THANK YOU!

Please initial the items below and sign at the bottom:

My child has received all immunizations recommended by the state of MN. **(Required Berry Patch policy.)**

I give The Berry Patch staff permission to:

Include our names, addresses and contact information in a school directory that is distributed to my child's classmates in the fall. I understand that I will have the opportunity to approve the information to be included prior to publication and may opt out.

Take pictures of my child participating in school activities and to use them in classroom and hallway displays, projects, or on the school website, social media, etc. (Names will NOT be included with pictures used on the Web.)

Allow my child to participate in all Berry Patch in-house and off-site field trips. I understand that bus and field trip fees will be reflected in a one-time activity fee of \$80 invoiced to my child's account in September.

I give my child permission to use hand sanitizer as necessary while on field trips.

Raspberries and Huckleberries only:

As a licensed child-care center, we are required to have written permission from you to diaper your children. Please sign the statement below indicating that you give The Berry Patch permission to change your child's diaper or pull-up as needed.

The Berry Patch School has permission to diaper my child when necessary. This includes the use of parent-provided diapers, wipes, ointments and pull-ups as my child's teacher deems necessary.

My child has permission to participate in an in-house field trip during the upcoming school year. I understand that this will include an additional activity fee of \$10 that will be reflected on my child's September invoice.

PARENT SIGNATURE: _____ DATE: _____

Registration reminders:

1. All 3-, 4 -and 5-year olds must be fully potty-trained
2. Child must be age indicated for class selected BY SEPTEMBER 1
3. All children registering after September 1, 2017 must be FULLY IMMUNIZED.

PLEASE RANK YOUR TOP THREE CHOICES WHEN MAKING CLASS SELECTIONS

All classes must have at least 6 students registered to be offered

STRAWBERRIES/PRE-K: age 4 or 5 as of September 1 (1:10 teacher/student ratio)

CALVARY:

- _____ T/W/TH a.m.
- _____ M-TH a.m.
- _____ M-F a.m.
- _____ M-TH Full Day (9-3)
- _____ M-TH Full Day (9-3) + Fri a.m.

COLONIAL:

- _____ T/W/TH a.m.
- _____ M-TH a.m.
- _____ M-F a.m.
- NEW! _____ M-Th Full Day (9-3)
- NEW! _____ M-TH Full Day (9-3) + Fri a.m.

BLUEBERRIES: age 3 as of September 1 (1:9 teacher/student ratio)

CALVARY:

- _____ M/W
- _____ T/TH
- _____ M/W/F
- _____ T/TH/F

COLONIAL:

- _____ M/W
- _____ T/TTH
- _____ M/W/F
- _____ T/TH/F

HUCKLEBERRIES: age 2 as of September 1 (1:6 teacher/student ratio):

CALVARY:

- _____ Friday ONLY
- _____ M/W
- _____ T/TH
- _____ M/W/F
- _____ T/TH/F

COLONIAL:

- _____ Friday ONLY
- _____ M/W
- _____ T/TTH
- _____ M/W/F
- _____ T/TH/F

RASPBERRIES: 18 – 24 months as of September 1 (1:5 teacher/student ratio)

CALVARY:

- _____ Friday ONLY
- _____ M/W
- NEW! _____ T/TH
- _____ M/W/F
- NEW! _____ T/Th/F

FRENCH FRIDAYS: ages 3-5 as of September 1 (1:7 teacher/student ratio)

- _____ French Fridays at Calvary
- NEW! _____ French Fridays at Colonial

SPANISH AFTERNOONS: ages 3-5 as of September 1 (1:7 teacher/student ratio)

- NEW! _____ Spanish Mondays at Calvary
- NEW! _____ Spanish Thursdays at Colonial

PARENT INPUT FORM may be completed if you wish to provide input regarding the classroom environment you feel would be best suited for your student. This can be picked up at your school's check-in area and is due in the main office NO later than June 1.

For office use only: Entered: _____ QB: _____
 Fee rec'd: _____ Reg fee invoice: _____
 Confirmation sent _____ Tuition invoice: _____
 Start Date: _____