

BLOSSOM INTERNATIONAL PRESCHOOL

5001 Pennsylvania Avenue . Boulder, CO 80303 . T 303.819.4084

info@blossombilingualpreschool.com

2025-26 School Year Enrollment Application for New Children

Please type or print legibly!

Today's Date: _____ Anticipated Date of Enrollment: _____

Child's Name: _____

Date of Birth: _____ Gender: _____ Current Age: _____

My child will attend _____ (3, 4 or 5) days a week.

Full days (8:30am-5:30pm) M _____ Tu _____ W _____ Th _____ F _____

Half days (8:30am-1:15pm) M _____ Tu _____ W _____ Th _____ F _____

Note: Blossom closes at 4:30pm every Friday

Parent #1: _____ Home Phone: _____

Address: _____ Work Phone: _____

City/State/Zip: _____ Cell Phone: _____

Employer name and location: _____

E-mail: _____

Parent #2: _____ Home Phone: _____

Address: _____ Work Phone: _____

City/State/Zip: _____ Cell Phone: _____

Employer name and location: _____

E-mail: _____

Child lives with _____ Both parents _____ Joint custody _____ Other _____

If your child does not live with both parents in the same household, please describe the child's living arrangement: _____

Siblings

1. _____ Gender: _____ Age: _____

2. _____ Gender: _____ Age: _____

3. _____ Gender: _____ Age: _____

Person(s) designated to pick up or drop off your child:

1. _____ Phone _____

2. _____ Phone _____

3. _____ Phone _____

List school(s) your child has attended: _____

Do you have any concerns about your child from past child-care experience? Please describe: _____

What is your child's first language? _____

Does your child speak in full sentences in his/her first language? _____

What makes your child laugh? _____

Play habits _____

Eating schedule, behaviors, and food preferences _____

Sleeping patterns _____

Likes and dislikes _____

Gifts and challenges _____

Physical abilities _____

Actions/items sought when consolation is needed _____

Fears _____

Allergies _____

What illnesses has your child had? _____

Please describe any aspect of your child's personality you would like to see strengthened:

What types of family activities do you enjoy together?

Please describe your child's development regarding the following:
Putting on shoes _____
Putting on coat _____
Pulling on pants _____
Toilet training _____

Has your child ever bitten another child in a childcare center/preschool environment? _____
Has your child been asked to leave a previous childcare center/preschool due to challenging behavior? _____
Other comments to help us know your child better: _____

Media _____ Radio _____ TV _____ CD's _____ DVD's _____ Computer Games _____

As a parent, are you aware of media's adverse effects on children and their development
_____ Yes _____ No

____ Enclosed is the application fee of \$80, which I/we understand is non-refundable.

After my application is reviewed and accepted, I will be sent a contract and a materials fee invoice. I understand that if I want my child to attend Blossom International Preschool, I must provide a signed copy of the 2024-2025 contract and the non-refundable deposit (materials fee) to secure my child's spot.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Kindly return your application and your \$80 non-refundable application fee to:

info@blossombilingualpreschool.com

or

5001 Pennsylvania Ave – Boulder, CO 80303

VENMO: @mariepnicoletti (last 4 digits 4084)

Blossom International Preschool does not discriminate on the basis of race, color, religion, national or ethnic origin in the administration of its educational policies and admissions policies, or any school administered programs.