Irvington Preschool **Application Form**
2710 NE 14th Avenue
Portland, OR 97212
503.287.3288

Child's Name:_____
(first) (middle) Last

Date of Birth:_____
(MM/DD/YY)

Address: _____
Home Phone:_____Cell Phone:_____
Email:_____
Parent/Guardian Name:_____
Parent/Guardian Name:_____

I wish to enroll my child in the:

○ **Butterfly Class** for children age 4 by September 1st of the school year. Meets Monday, Wednesday and Friday from 9:30am-12:30pm

○ **Caterpillar Class** for children age 3 by September 1st of the school year. Meets Tuesday and Thursday from 9:30am-12:00pm

Is your child currently enrolled at Irvington Preschool or has another child in your family attended Irvington Preschool?

○ **No**

○ **Yes If YES, please use the Alumni Family Enrollment Form**

Agreement of Participation—I understand that as members of Irvington Preschool, our family is required to:

- Participate in all fundraising projects and meet the minimum portion of the fundraising budget allotted to each family
- Parent help in the classroom
- Carry out the duties of the preschool job assigned to our family
- Attend monthly General Membership Meetings
- Meet financial obligations on time
- Participate in school programs and events, including scheduled clean ups
- Comply with the by-laws of Irvington Preschool

_____
(Signature) (Relationship to Child) (Date)

This enrollment application cannot be accepted unless it is accompanied by the $15.00 registration fee. The registration fee is non refundable. Please make checks payable to Irvington Preschool. Irvington Preschool values diversity and does not discriminate on the basis of race, color, socio-economic status, family structure, disability or national/ethnic origin.