

2010 - 2011 REGISTRATION FORM

Sunshine School in Oro Valley, Inc.
9000 N. Oracle Rd, Suite 204
Tucson, AZ 85704-7490
Phone (520) 742 - 6874
Fax (520) 877 - 9553
Today's Date _____

Parents are to access our website, www.sunshineschooltucson.org. By initialing here, _____, you acknowledge that you will abide by Sunshine's policies as outlined on the site. Thank you.

REMINDER: this is the final step in completing Sunshine's registration process. You *should* have submitted your child's Reservation form earlier, and we *should* have taken you on a tour of school prior to this date. Have you met those criteria? If so, download this form; complete it in pencil, please; and mail it to us at the above address. Thank you! We're pleased that you're joining our Sunshine family.

Child's name _____ Birth date _____
Home address _____ ZIP _____
Home phone _____ Mom's cell # _____ Dad's cell # _____
E-mail address to receive Sunshine calendars and newsletters: _____
Names & ages of others in your household (mom, dad, siblings, relatives) _____

- **Attach a recent family photo to this form. We'll keep it for the year so that all of us can learn to recognize your sweet faces. Thank you.**
- **Attach a copy of your child's birth certificate to this form. Thanks again.**
- **Your child has a spot reserved in the class which meets _____ .**

→ **IN CASE OF EMERGENCY**, we want to reach you/someone quickly. Whom should we call
1st? _____ @ what # _____
2nd? _____ @ what # _____
3rd? _____ @ what # _____

SPECIAL INFORMATION ABOUT YOU:

1. What are your occupations (& please be specific: *mechanical engineer; pediatric nurse, etc*)
Mom _____; Dad _____
Could we call upon you to share your expertise with the children? Mom: _____ Dad: _____
2. Are either of you interested in becoming a Sunshine volunteer? _____ It's quite a process but very worthwhile. Please call the Director for details. Thanks.
3. If you are divorced or separated, who has custody of the child(ren)? _____ (If one parent has sole custody, please contact the Director. Thank you.)

PARENTAL NOTICES:

- a) If a child is photographed or videotaped for Sunshine's in-house purposes or for a media story or for promotional material, we would **NOT** intentionally identify a child by name. If any name is used, it would be the child's first name only. **IF YOU HAVE OBJECTIONS OR CONCERNS, PLEASE CONTACT THE DIRECTOR.**
- b) We assume that we have your permission to sign the attendance book on your behalf (imagine your baby is sleeping in the car. We'll come fetch your preschooler & sign the book for you.) **AGAIN, IF YOU HAVE OBJECTIONS OR CONCERNS ABOUT THIS AUTHORIZATION, PLEASE SEE THE DIRECTOR.**

Your signature _____ and today's date _____

Inquiry for parents

Please be honest in your responses. Thank you.

Your name _____ Today's date _____

Your child's first name _____ and DOB _____

Has Your child previously attended preschool or childcare? _____ For what length of time? _____ Was this a good experience? _____ If not, why? _____

- **What would you like your child to learn while @ Sunshine?** Be specific on a few topics (particular social or academic skills, such as "I'd like my son to be able to leave me without crying; I'd like him to learn to follow directions; I want him to hold a pencil properly and learn to print his name.")

- What does your child do well? Not so well? **Do you have any concerns about your child's development? Remember: be honest.** (For instance, "My daughter can recite all the letters of the alphabet, but she only recognizes two letters in her name." Or, "My daughter grasps a marker around the entire barrel; she doesn't even try to hold a pencil properly.")

- **Parenting is difficult! What is your biggest challenge with your child? What else would you like us to know and appreciate? Once again: be honest.** Is your child bilingual? Is he angry often? Examples: "My child loves music and will dance for you all day long!" "My child can't focus on a task." "Loud noises make my son crazy."

- **Does your child have a special need? Is there a speech or language delay? Do you have a diagnosis of Autism Spectrum Disorder? Does your child see an Occupational Therapist? Are you receiving private and/or public services?** Please describe your child's situation fully and honestly. We'll discuss this with you in depth. (And, blessings to you. . .)