

# Hawk's Nest Preschool

**\*\*Please save this sheet for your records\*\***

Thank you for your interest in the Hawk's Nest Preschool Program. Please fill out the registration form and return it to the address listed on the bottom. You may also fill it out at the school's office and have the office secretary put it in my mailbox (Sara Butera. **Please do not include money** with the application form. Upon acceptance, you will receive information detailing parent night, date/times of preschool and registration fees and payment procedures.

## **Enrollment:**

As an integral part of the Family and Consumer Science curriculum, the Childhood Education course is designed to provide a lab school experience for the enrolled high school students. Preschool children may participate in the program several days a week. Students **MUST** be potty trained by first day of preschool as well as be the age of the program in which you are requesting admittance to.

A current medical form must be filled out by the child's doctor, and submitted by the first day of the preschool program.

## **Fees:**

The preschool program fee is \$250 for the school year. This fee covers supplies for the children. It is non-refundable once the school year has begun. Initial payment of \$125 must be paid by the first day of school. Payment may be paid in full if you so choose. If you choose to pay by semesters the second payment of \$125 is due after the winter break.

## **Schedule:**

Our preschool schedule varies from the U-46 calendar. **Our preschool program does not start until September and ends in early May. Our program admittance is first come first serve, with limited spots available. Once registration form is completed and returned, Mrs. Butera will communicate next steps.** Please be advised that our preschool program must adapt to the flexible nature of the high school schedule; therefore, cancellations and/or changes in the daily schedule may occur. We will inform you as far in advance as possible.

Please fill out registration form and send it to address below.

Thank you,  
Mrs. Butera (Palmer)  
[sarapalmer@u-46.org](mailto:sarapalmer@u-46.org)

**Bartlett High School Address**  
701 Schick Rd.  
Bartlett, IL 60103

BARTLETT HIGH SCHOOL  
HAWK'S NEST PRESCHOOL REGISTRATION FROM 2019-2020

Full name of child: \_\_\_\_\_

Child prefers to be called: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Preference of child's name on printed items such as nametags, cubbies, etc.:

\_\_\_\_\_

Parent(s) first and last names:     Mother: \_\_\_\_\_

   Father: \_\_\_\_\_

Mother's  
Address: \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Work Phone# \_\_\_\_\_

Email: \_\_\_\_\_

Father's  
Address: \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Work Phone# \_\_\_\_\_

Email: \_\_\_\_\_

**Name and phone number of another person to contact in case of an emergency:**

Name: \_\_\_\_\_

Phone # \_\_\_\_\_ Relation to child: \_\_\_\_\_

**SPECIAL NEEDS:** Does your child have any allergies, health problems, fears, or other special needs that would help us to work more effectively with your child, please describe:

Any other information that you would like the teachers to know:

Have you had any children in our program before?    No    Yes

Names of children:

How did you learn about our program?

Please circle which program you are registering for:    3 year old                      4 year old

Please return form to Bartlett High School Attn: Sara Butera (Palmer)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_