

**First Baptist Christian Day School  
Registration/Enrollment Form  
7300 Gary Street, Springfield, VA 22150  
703-451-7144  
E-mail Address: m.lee@fbcspringfield.org**

Date of Application \_\_\_/\_\_\_/\_\_\_ Registration/Activity Fee: \$85 (2 1/2 yr. old class)  
**(NON-REFUNDABLE)** \$85 (3 & 4 yr. old class)

Child's Name \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_  
 Last First Middle

Name to be used at school if different than above: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

**Please indicate age group and number of days to attend:**

\_\_\_ 2 years old (2 day only)T/Th  
 \_\_\_ 3 years old (2 day)T/Th (3 day)M/W/F (5 day)Mon.-Fri.  
 \_\_\_ 4 years old (2 day)T/Th (3 day)M/W/F (4 day)Tues.-Fri. (5 day)Mon.-Fri.

Address \_\_\_\_\_  
 Street City Zip Code

Subdivision \_\_\_\_\_  
 Home Phone \_\_\_\_\_  
 Pager Number \_\_\_\_\_  
 E-Mail \_\_\_\_\_

How did you learn about FBCDS? \_\_\_\_\_

List known allergies \_\_\_\_\_

Father's Name \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Office Phone \_\_\_\_\_  
 Cell Phone Number \_\_\_\_\_  
 Church Affiliation \_\_\_\_\_

List known fears \_\_\_\_\_

Mother's Name \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Office Phone \_\_\_\_\_  
 Cell Phone Number \_\_\_\_\_  
 Church Affiliation \_\_\_\_\_

Name of child's doctor in case of emergency:  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
 Emergency Contact # \_\_\_\_\_

Three and Four year olds **MUST** be day-time potty-trained.  
 Is your child day-time trained?  
 \_\_\_ Yes \_\_\_ No \_\_\_ Will be for school.

Are the Parents: Married \_\_\_ Divorced \_\_\_  
 Separated \_\_\_ Single \_\_\_ Deceased \_\_\_

Does your child speak English? \_\_\_ Yes \_\_\_ No

Does your child understand English? \_\_\_ Yes \_\_\_ No

Name of care giver \_\_\_\_\_  
 Care giver's phone # \_\_\_\_\_

Has your child attended preschool or a Mother's Day Out?  
 \_\_\_ Yes \_\_\_ No

Brothers and Sisters:  
 Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of preschool or Mother's Day Out last attended:  
 \_\_\_\_\_  
 City State

\_\_\_\_\_  
 \_\_\_\_\_

What is your child's favorite activity? \_\_\_\_\_

**Class Roster**

May we have permission to include your name, address, e-mail address, and home and cell phone numbers in a class roster? The roster is distributed ONLY to Day School families, and is used to help parents form carpools and organize class parties.

**Parent's regular activities outside of the home** (volunteer work, exercise class, Bible study, etc.) In case of an emergency.

Yes \_\_\_\_\_  
 Signature \_\_\_\_\_

Monday \_\_\_\_\_  
 Tuesday \_\_\_\_\_  
 Wednesday \_\_\_\_\_  
 Thursday \_\_\_\_\_  
 Friday \_\_\_\_\_

No \_\_\_\_\_  
 Signature \_\_\_\_\_

*Please complete the reverse side of this form so we might more easily work with your child, and understand his/her needs. Thank you.*

I have read the Parent Information Handbook (which is on the website) and I understand the policies of the First Baptist Christian Day School. I agree to uphold them.

Yes \_\_\_\_\_  
Parent Signature

No \_\_\_\_\_  
Parent Signature

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I understand that my child **must be fully immunized** in order to be enrolled at First Baptist Christian Day School. (Refer: Parent Information Handbook - Page 14, Item #1)

Yes \_\_\_\_\_  
Parent Signature

No \_\_\_\_\_  
Parent Signature

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I understand **three and four year old children must be day-time potty-trained** and able to care for personal toilet needs independently to be able to attend FBCDS.

Yes \_\_\_\_\_  
Parent Signature

No \_\_\_\_\_  
Parent Signature

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I understand a **“late tuition fee”** will be imposed on me at the rate of **\$15** if my tuition payment is not made by the 15<sup>th</sup> of each month.

Yes \_\_\_\_\_  
Parent Signature

No \_\_\_\_\_  
Parent Signature

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I understand a **“late pick-up fee”** will be imposed on me **at the rate of \$1.00 per minute** if my child is picked up after dismissal time (12:30 regularly or 1:30 PM after Lunch Bunch.)

Yes \_\_\_\_\_  
Parent Signature

No \_\_\_\_\_  
Parent Signature

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**Circle all words which describe your child:**

shy  
happy  
cooperative  
easy going  
creative  
easily distracted  
inquisitive  
stubborn  
has a temper  
possessive  
afraid of new things  
fearful  
sleeps well  
belligerent  
messy  
unhappy  
imaginative  
long attention span  
curious

strong willed  
daring  
cries easily  
good eater  
follows simple directions  
enjoys group activities  
tidy  
is a “joiner”  
gets sick easily  
thoughtful  
short attention span  
adventurous  
shares well  
follower  
separates well from parents  
finicky eater  
outgoing  
leader  
attentive