

MESSIAH PRESCHOOL

5202 Cottage Grove Road
Madison WI 53716

Application Date: _____

Enrolled in: M TU W TH F Time: _____

Full name of child: _____

Birthdate: _____

Street _____ City _____ Zip _____

Phone: _____

Name child will use at school: _____

Is your child: left-handed right-handed

Father's name: _____

Father's occupation: _____

Mother's name: _____

Mother's occupation: _____

List names and ages of all children in the home: _____

Caretaker's name: _____

Phone: _____

Parent Signature: _____