

**PLYMOUTH PRESCHOOL APPLICATION**

PLYMOUTH PRESCHOOL OF PLYMOUTH CONGREGATIONAL CHURCH

3429 Devon Road, Miami, Fl. 33133 • (305) 448-8774 • admissions@plymouthpreschool.com

\_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Child's Name \_\_\_\_\_ Date of Birth (Must be  
12 months old to apply)

Parents' Names \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone Mother \_\_\_\_\_

Work Phone Father \_\_\_\_\_

Email Address(es) \_\_\_\_\_

A non-refundable fee of \$125.00 must be attached for this application to be complete.

Please check **all** of the following items which indicate your present interests for your child's application tot Plymouth Preschool. **Please note: WE USE THE SEPTEMBER 1 CUT OFF DATE WHEN MAKING CLASS PLACEMENTS.** This application is for what school year? \_\_\_\_\_

Please notify the registrar each year you want this application to remain active.

\_\_\_ Class for 4 year olds, 5 days a week (must be 4 by September 1)

\_\_\_ Class for 3 year olds, 5 days a week (must be three by September 1)

\_\_\_ Class for 2 year olds, \_\_\_ 5 days a week until 1:00 (turns 3 between Sept 1 – Dec 31 & toilet trained)  
\_\_\_ 3 days a week until 1:00 Mon/Wed/Fri (turns 3 between Nov 1 & March 31)  
\_\_\_ 2 days a week until noon Tues/Thurs. (turns 3 between April 1 & August 30)

**Summer Camp enrollment** is open to all children in the community who are 3 by December 31, potty trained and not yet enrolled in first grade. All school applicants are automatically sent registration information about summer camp.

Where do you anticipate that your child will continue schooling after leaving Plymouth (public school? private? possible options?) \_\_\_\_\_

**Check all statements which apply:**

- \_\_\_\_\_ Financial Aid applicant (available to five-day students only)
- \_\_\_\_\_ Parent is staff member of Plymouth Church or Plymouth Preschool
- \_\_\_\_\_ One or both Parents are **ACTIVE Plymouth Congregational Church** members since \_\_\_\_\_
- \_\_\_\_\_ Parent is Preschool Board Member
- \_\_\_\_\_ Parent is interested in becoming a Board member
- \_\_\_\_\_ Child has previously attended Plymouth Preschool
- \_\_\_\_\_ Child has brother or sister also applying for the same school term \_\_\_\_\_ (Name & birthdate)
- \_\_\_\_\_ Older sibling previously attended Plymouth Preschool \_\_\_\_\_ (Name & date attended)
- \_\_\_\_\_ Parent attended Plymouth Preschool \_\_\_\_\_ (Name & date attended)

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

**Office Use only:**

Date application received: \_\_\_\_\_ paid: Check # \_\_\_\_\_ Cash \_\_\_\_\_ Date paid \_\_\_\_\_