Enrolling in:				
☐ T/Th (3s)				
☐ M/W/F (4s)				



For use by Membership:				
Check #:				
Enroll date:				
Start date:				
LDA:				

APPLICATION FOR ADMISSION AND CHILD REGISTRATION

Make check payable to **Pleasant Valley Preschool** and return \$75 (\$65 for returning families) registration fee to PVP REGISTRATION; 13615 Pennsboro Drive, Chantilly, VA 20151

Child's Name:	Sex: M F						
Name to be called in school:	Birthday:						
Address:	Subdivision:						
Father's Name:	Mother's Name:						
Home Address:	Home Address:						
Phone:	Phone:	Phone:					
Employer:		Employer:					
Work Phone:		Work Phone:					
E-mail:		E-mail:					
Additional programs or schools Child attends or has attended:		ade level (if applicable):	Dates of Attendance:				
SOCIAL AND PROMOTIONAL PHOTOS/V Children enrolled in PVP programs may and promotional purposes unless a sepa I agree, in consideration of the enrollme against the Directors, Staff, Teachers, Pa loss or damages that may arise out of th any claim for intentional misconduct or	be photograph arate written re ent of my child arent Helpers a ne operation of	equest not to photograph of in PVP, to waive, for mysel and the landlord of the school the preschool. Nothing in	or videotape is submit f and my child, any ar pol premises for perso	tted to S nd all cla onal inju	ims ry or other		
Parent:	Date:	Parent:		Date	e:		
PROOF OF CHILD IDENTITY (Must be completed by Membership/school staff prior to child attending PVP)							
Place of Birth: DOB	:	Birth Certificate #:	Date	Issued:			
Other Form of Proof:	Date Viewed: Person Viewing Documentation:						