



## Application for Admission

Class Preference (Indicate Choice: 1, 2, 3)

- \_\_\_\_\_ 2A- (T/TH) 8:25a.m.-10:40a.m.
- \_\_\_\_\_ 2B- (T/TH) 11:30a.m.-1:45p.m.
- \_\_\_\_\_ 3A- (T/TH) 8:15a.m.-10:45a.m.
- \_\_\_\_\_ 3B- (T/TH) 11:30a.m.-2:00p.m.
- \_\_\_\_\_ 3C- (M/W/F) 8:15a.m.-10:45a.m.
- \_\_\_\_\_ 3 ½ D- (M/W/F) 11:30a.m.-2:00p.m.
- \_\_\_\_\_ Pre-K 4A- (MWF) 8:15a.m.-11:00a.m.
- \_\_\_\_\_ Pre-K 4B- (MWF) 11:30a.m.-2:15p.m.
- \_\_\_\_\_ Pre-K 4C- (M-F) 8:20a.m.-11:05a.m.
- \_\_\_\_\_ Pre-K 5- (M-F) 11:30a.m.-2:15p.m.

# Noah's Ark Preschool

1617 E. Emerson St. Bloomington, IL 61701

(309) 828-1974 (309) 829-3866, FAX

[www.stjohnsbloomington.org/noahsark](http://www.stjohnsbloomington.org/noahsark)

[noahsark@stjohnsbloomington.org](mailto:noahsark@stjohnsbloomington.org)

### OFFICE USE

Med \_\_\_\_\_ Emer \_\_\_\_\_

Date Rec'd \_\_\_\_\_

Amount Rec'd \_\_\_\_\_

Check No \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Home Telephone Number \_\_\_\_\_

Child's Full Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Name Child Prefers to Be Called \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Child will attend for Kindergarten \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell Phone Numbers \_\_\_\_\_

Mother's Employment \_\_\_\_\_ Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone Numbers \_\_\_\_\_

Father's Employment \_\_\_\_\_ Phone \_\_\_\_\_

Marital Status of Parents \_\_\_\_\_ Child Resides with \_\_\_\_\_

Child Care Name \_\_\_\_\_ Phone \_\_\_\_\_

Child Care Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address for Mailings and Notifications \_\_\_\_\_

In case of emergency and parents cannot be reached, the following persons may be called:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Child's Doctor \_\_\_\_\_ Phone \_\_\_\_\_