

**Front Street United Methodist Church Playschool**  
**Family Information and Scheduling**

**Please circle appropriate priority:**

Church member

Repeating four

Church enrolled

Sibling of currently enrolled student

BMO member

Currently Unaffiliated

**Child's name** \_\_\_\_\_

**Your name** \_\_\_\_\_

**Your address** \_\_\_\_\_

**Indicate 1<sup>st</sup> and 2<sup>nd</sup> choice of class and days:**

\_\_\_\_ 2 yr old T/Th

\_\_\_\_ 2 yr old M/W

\_\_\_\_ 3 yr old T/Th

\_\_\_\_ 3 yr old M/W/F

\_\_\_\_ 4 yr old M/W/F

\_\_\_\_ 4 yr old 5 days

**For class placement purposes:**

Please list the names of children with whom your child is friendly:

Please list the names of children you or your child's teacher feel your child should **not** be with: