

GVUMC Preschool and Kindergarten  
Enrollment Form  
Kindergarten

Student's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student's Nick Name: \_\_\_\_\_

Student's Birth Date: \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home telephone number: \_\_\_\_\_

Alternate telephone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Siblings who will be attending GVUMC Preschool:

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

The Green Valley Methodist Preschool & Kindergarten is operated as an exempt school under the provision of NRS 394.211 and as such is exempt from the provisions of the Private Elementary and Secondary Education Authorization Act.

The registration fee is \$100.00 and is due upon registration. The registration fee is non-refundable.

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Office Use:

Date Received: \_\_\_\_\_ Check#: \_\_\_\_\_ Amount: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# OFFICE USE ONLY

## Kindergarten Student Records Worksheet

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Teacher

\_\_\_\_\_ Student Information Form

\_\_\_\_\_ Health Statement

\_\_\_\_\_ Copy of birth certificate

\_\_\_\_\_ Pest control notification

\_\_\_\_\_ Immunization records

\_\_\_\_\_ NRS 4-32A.178

\_\_\_\_\_ Kindergarten contract/permission to release information Y / N

\_\_\_\_\_ Permission to use photographs Y / N

\_\_\_\_\_ Registration Fee \$100.00

\_\_\_\_\_ Curriculum Fee of \$250.00

\_\_\_\_\_ Tuition for September in the amount of \$575.00

\_\_\_\_\_ Allergies Y / N To what? \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_