



**Please submit this form to:**  
 Washington Pavilion  
 301 S. Main Ave. - Sioux Falls, SD 57104  
 (605) 367-6000 - [washingtonpavilion.org](http://washingtonpavilion.org)

Public Enrollment Starts: January 5, 2019 at 10 a.m.  
 Current Student Enrollment Starts: January 2, 2019

## 2019-20 Graham Academy Preschool Application – New Students

Student Information				
First Name	Middle Name	Last Name		
Preferred Name	Birth Date	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		
Home Phone	Address	City	State	Zip
<p>Please indicate the class you wish to enroll your child in. Please note that we limit each class size. If the class is at capacity, we will notify you and put your child on the waiting list.</p> <p><input type="checkbox"/> <b>Ages 3-4</b> (must be 3 as of September 1)            2 day class: Tuesday and Thursday   9:15 a.m.-11:45 a.m.</p> <p><input type="checkbox"/> <b>Ages 3-4</b> (must be 3 as of September 1)            3 day class: Monday, Wednesday, Friday   9:15 a.m.-11:45 a.m.</p> <p><input type="checkbox"/> <b>K prep: Ages 4-5</b> (must be 4 as of September 1)            4 day class: Monday – Thursday   1-4 p.m.</p>				
Is your child fully toilet trained and able to use the restroom independently? <small>*Children must be fully toilet trained and able to use the restroom independently by the start of preschool.</small>			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Parent/Guardian Contact Information				
Parent/Guardian(s)	Relationship to Child	Home Phone		
Address	City	State	Zip	Cell Phone
Occupation	Preferred Email			
Parent/Guardian(s)	Relationship to Child	Home Phone		
Address	City	State	Zip	Cell Phone
Occupation	Preferred Email			



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Additional Information		
Please list your child's previous preschools or daycares and the reason for leaving:		
Facility Name & Location	Dates Attended (mo/yr-mo/yr)	Reason for Leaving:
Facility Name & Location	Dates Attended (mo/yr-mo/yr)	Reason for Leaving:
Does your child have any special needs, restrictions or allergies of which the Graham Academy Preschool should be aware?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your child a previous Graham Academy Preschool student or a sibling of a previous or current student?		<input type="checkbox"/> Yes <input type="checkbox"/> No
How did you find out about the Graham Academy Preschool? (check all that apply)		
<input type="checkbox"/> Washington Pavilion newsletter	<input type="checkbox"/> Friend	<input type="checkbox"/> Website Other _____
<input type="checkbox"/> Visiting the Pavilion	<input type="checkbox"/> Website	
<input type="checkbox"/> Graham Academy Preschool Parent		
Parent/Guardian Signature		Date

Please submit this application to the Washington Pavilion Box Office with a **\$25 non-refundable registration fee**, plus a **May 2020 tuition deposit** (refundable on a sliding scale until August 15, 2019). Your deposit holds your class spot as indicated on this registration form.

I have included the applicable fees.

Amount due at enrollment		
<input type="checkbox"/> T T H	<input type="checkbox"/> M W F	<input type="checkbox"/> M T W T H
\$172 May 2019 Tuition*	\$227 May 2019 Tuition*	\$327 May 2019 Tuition*
+ \$25 Registration Fee (non-refundable)	+ \$25 Registration Fee (non-refundable)	+ \$25 Registration Fee (non-refundable)
<b>\$197 Total due at enrollment</b>	<b>\$252 Total due at enrollment</b>	<b>\$352 Total due at enrollment</b>

**For Office Use Only**  
 Date Received: