

telephone: day _____ evening _____

home address _____

What is your occupation ? _____

Work address _____

Email _____

Special skills you can bring to a co-op _____

What is the main reason for your interest in this program ? _____

Does your child have...

Agassiz siblings? YES NO _____ dates _____

Other siblings? YES NO _____ ages _____

How did you first learn about Agassiz Preschool ?

Agassiz family (name): _____

yellow pages listing advertisement

flyer open house other (explain)

Co-op members have important roles in the school. Agassiz depends on parent involvement and participation. Will a parent or guardian be able to:

- Assist as a parent-helper approximately once a month YES NO
- Provide a school snack every 7-8 weeks? YES NO
- Perform a parent job, task & attend committee meetings? YES NO
- Attend all-school and group meetings? YES NO
- Participate in fundraising activities? YES NO
- Assist in a work day? YES NO

Check here if you would like to apply for financial aid. Applications available upon request/online. Scholarships are awarded on the basis of need.

Please enclose a fee of \$50 with your completed application. Checks should be made payable to Agassiz Preschool, Inc.

Agassiz Preschool strives to be a culturally and racially balanced school and encourages applications from all families and especially from minorities.

www.agassizpreschool.org