



A L A Y A P R E S C H O O L
3340 Nineteenth Street · Boulder, Colorado 80304 · 303-449-5248

ALAYA ENROLLMENT PACKET 2010/20011 SCHOOL YEAR SIGNATURE PAGE

CHILD'S NAME _____ SEX _____ BIRTHDATE _____

ADDRESS _____

DOCTOR'S NAME _____ PHONE _____

DOCTOR'S ADDRESS _____

DENTIST'S NAME _____ PHONE _____

DENTIST'S ADDRESS _____

PARENT (or GUARDIAN) NAME _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

ADDRESS _____

PARENT (or GUARDIAN) NAME _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

ADDRESS _____

Please mark any or all of the areas you would like listed in our classroom and all school directory.

- Home phone
- Cell Phone/s
- Address
- E-mail, please list preferred email contact(s) _____
- I do not wish to be included in the class/school directory

Please indicate how you would like to receive the Alaya monthly news letter.

- By email
- Paper copy in my child's folder

I have read and I will adhere to the Alaya Preschool 2010/2011 School Year Financial Policies and Enrollment Agreement.

Please give this form to the Alaya office. A copy of this form will go into your child's file.

A division of Naropa University, a non-profit educational institution



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Signatures (Parents or Guardians) _____

Both signatures are required unless one parent has sole custody

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