

# Little Red Schoolhouse of Metairie

2055 Metairie Road, Metairie, Louisiana 70005  
www.littleredschoolhouseofmetairie.com  
Phone: (504) 838-7979 • Fax: (504) 835-5200

## Preschool Application 2010 - 2011

Upon receipt of this form, you will be called and a personal interview will be arranged for you and your child. This is not a registration form. Children will be accepted on the basis of:

1. The date on which this application is received.
2. The openings available in the child's age group
3. The personal interview

Date \_\_\_\_\_

**My child is applying for the following class:**

<b>YOUNG THREE</b> _____	<b>Hours Needed</b> _____
<b>MIDDLE THREE</b> _____	<b>Hours Needed</b> _____
<b>OLDER THREE</b> _____	<b>Hours Needed</b> _____
<b>YOUNG FOUR</b> _____	<b>Hours Needed</b> _____
<b>OLDER FOUR</b> _____	<b>Hours Needed</b> _____

**Name of Child** \_\_\_\_\_ **Name Used** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cellular Ph. Mom:** \_\_\_\_\_ **Dad:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

### Parent or Guardian Information

Parents Marital Status: Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Single \_\_\_

Father's Name \_\_\_\_\_

Address (If different from child) \_\_\_\_\_ Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_

Business Name and Address \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address (If different from child) \_\_\_\_\_ Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_

Business Name and Address \_\_\_\_\_

