



2022-2023 Shining Stars Academic Preschool  
Child/Parent Registration Form

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

**Mother/Guardian:** Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Father/Guardian:** Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Other Emergency Contact besides Parent/Guardian:**

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Permission for other to pick up besides Parent/Guardian:**

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Does your child have any allergies or chronic illnesses? Yes  No

If yes, please explain \_\_\_\_\_

Please list any other comments or information regarding your child's behavior or personality that would be beneficial to know: \_\_\_\_\_

\_\_\_\_\_ 2 days a week T/TH 8:40 am – 12:00 pm \$175 per month

\_\_\_\_\_ 3 days a week M/W/F 8:40 am – 12:00 pm \$225 per month

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**\$60 nonrefundable registration/supply fee is due at time of registration**

# Shining Stars Academic Preschool

## Image Information opt-out designation

### IMAGE OPT OUT

Throughout the year, Mercury Gymnastics might take pictures or video and release personal information about our students for promotion. Examples might include but are not limited to:

- Mercury Gymnastics might post pictures of students on our website or Facebook page.
- Students might have their names and photos published in newsletters or advertisement.

If you **DO NOT** want your child's image or information used, check the image opt-out box below.

### IMAGE OPT OUT

- DO NOT** release my student's picture or information for promotional purposes.

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Students Name

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Date

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Parent/Guardian Signature

Note: The opt-out selection(s) designated above must be signed annually.