

Alamo Country School
1261 Laverock lane, Alamo CA 94510
Registration Form

Child's Name _____ Birth date/age _____
Home Address _____ City/zip _____
Home Phone _____
Father's Name _____ Occupation _____
Father's Employer _____ Work phone _____
Cell phone _____
Mother's Name _____ Occupation _____
Mother's Employer _____ Work phone _____
Cell phone _____

*ONE Email address: _____
One phone number we may text in an emergency: _____
Do both parents live with child? _____
If not, which parent has custody? _____

Siblings? YES/NO
If yes, what age(s)? _____
Which school district would you be in and what school are you zoned for?

Please indicate child's desired schedule: Days: _____ Half day or Full day
Starting date: _____ Tuition: _____

Please note: It is extremely important that the above information be kept up to date. We will use this data to compile your child's emergency card. For the protection of your child, please notify the school immediately when changes occur.

I understand that in order to maintain a quality program, there is no credit given for absences. We are a year-round school. During my child's absences, full tuition is due (including vacations). We have the right to refuse business or terminate any client if we feel we are unable to continue to meet the needs to our standards.

In the event that it becomes necessary for my child to withdraw from school for two weeks or more, I understand that re-registration is required, and re-entry is subject to openings available. I agree to notify the school, in writing, 30 days in advance of withdraw or I will pay the difference.

I hereby agree to comply with the rules and regulations of Alamo Country School.
Parent's Signature _____

(Staff only)
Registered by: _____ Today's date: _____
Registration fee paid by: _____ cash _____ check number