

## Fall 2025 - Greenfield High School Play School - ADMISSION APPLICATION

Child's Name: \_\_\_\_\_  
LAST FIRST

Nickname: \_\_\_\_\_ Gender: \_\_\_\_\_ Age (as of October 27, 2025): \_\_\_\_\_ Birthday: \_\_\_\_\_

Address: \_\_\_\_\_ Main/Home Phone: \_\_\_\_\_

STREET \_\_\_\_\_

CITY STATE ZIP  
Father's Name: \_\_\_\_\_ Dad's cell: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mom's cell: \_\_\_\_\_

Person to email: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Emergency cell phone or alternative number to call (if applicable): \_\_\_\_\_

→ Whose number is this? \_\_\_\_\_

Is there any previous medical history that would affect your child's participation in activities?

Explain. \_\_\_\_\_

### **\*\*\*Does your child have any allergies? If so, to what?**

Are there any foods your child cannot eat and if so, what are they? \_\_\_\_\_

Who will be routinely bringing/picking up the child? \_\_\_\_\_

Other people who might be bringing child to school or taking child home: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

### ***A little about your child:***

1. Favorite toy:
2. Favorite thing to do during free time:
3. Favorite food:
4. Favorite book or television show:
5. Something unique about him/her:
6. What you hope they get most out of this program:

\*\*\*\*Is your child toilet trained? \_\_\_\_\_ Can she/he understand/speak English? \_\_\_\_\_

If not, what language does your child speak primarily? \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

Why are you interested in enrolling your child at playschool?

Any special instructions or special needs? If so, please describe:

All the information above is true and accurate to the best of my knowledge. I would like my child to be enrolled in the Greenfield High School Playschool.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\*\*\*\*\* Please be aware that we have a limited number of spots for our Playschool. It is on a first-come first-serve basis. However we will keep a list in case we have students drop out, and we will fill in as we go.

There will be a fee of \$50 per child to cover the cost of supplies and snacks throughout the 5 week program. Cash or Check made payable to Greenfield High School. No credit cards will be accepted at this time. This can be dropped off in the main office in an envelope for Becky Engelmann. The office staff will make sure I receive the payments.

**The program will run from October 27, 2025 to November 20, 2025  
(12 class periods)**

**Monday, Tuesday & Thursday**

**Time: 11:30-2:30**

Photography Request

Please let me know, by signing below, if we would have your permission to use photographs taken to help advertise and promote the child care courses and the Playschool. We might use these pictures in our yearbook, in the local newspaper, social media or to help recruit students to take our child care courses. If you do not return the slip, I will assume you will not allow your child's picture to be taken for these purposes. Thank you again for your support and for helping our community to grow stronger.

**Permission to release photographs**

I, \_\_\_\_\_, give permission to release any photograph taken of my child, \_\_\_\_\_, during the Playschool, sponsored by Greenfield High School for the Fall 2025 semester. I have read the above statements.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**\*\*I prefer not to** have my child photographed during GHS Playschool

\_\_\_\_\_.

**Please send materials back to:**

Greenfield High School

Attn: Mrs. Engelmann, Family & Consumer Ed. Dept.

4800 S. 60<sup>th</sup> Street; Greenfield, WI 53220

(Or scan and send to [rengelmann@greenfield.k12.wi.us](mailto:rengelmann@greenfield.k12.wi.us))