

The Learning Garden, LLC
Letter of Interest

Child's Full Name: _____ Date of Birth: _____

Child's Home Address: _____

Parent's Name: _____

Parent's Home Address _____

Mother's Phone # : _____ Cell: _____

Father's Phone # : _____ Cell: _____

Email address: _____

How did you hear about us? _____

Referred by: _____

Did you and your child tour The Learning Garden? _____ Month or Date: _____

Is your child able to use the bathroom independently? _____

Has your child been diagnosed or has a caregiver ever brought to your attention any developmental delays (visual impairment, speech delay, hearing impairment , ADD/ADHD? If yes, please explain:

Please list any know allergies _____

Will you be able to volunteer in school activities? _____

Where does you child currently attend a MDO, preschool, or daycare program? _____

Please tell us: why do you think your child would be a good fit for The Learning Garden?

Change in circumstances happen to our families and sometimes our little ones move mid -year. Would you be available or willing to enroll your child before Fall 2018?

Parents,

Please read The Learning Garden's Letter of Interest conditions below and sign if you agree and accept our policies.

I (We) understand and agree:

- By signing this Letter of Interest Form that I am expressing a desire for my child to attend the Little Sprouts 2018-2019 preschool program.
- The Letter of Interest Form does not guarantee my child has a spot for the upcoming school year.
- The Learning Garden will notify me via email as soon as administratively possible if my child has a place for the upcoming school year. At that time I will be given a 24 hour window in which to return a completed registration packet along with registration and supply fees payments due to confirm my child's spot.
- If my child is accepted, I will abide to The Learning Garden's policies and procedures stated in the Parent Handbook.
- If my child does not have a spot, their name will be placed on the Little Sprouts wait list as sometimes students move and leave the program mid-year.

Parent Signature: _____ **Date:** _____