
Previous Child Care/Preschool attended _____

Schedule Preference:

Schedule	Days
Preschool Day (9:00-2:30)	M T W TH FR All (1 st Choice)
	M T W TH FR All (2 nd Choice)
Full Day (more than 5.5 hours)	M T W TH FR All (1 st Choice)
	M T W TH FR All (2 nd Choice)

Your child:

Please provide us with a few details regarding your child's social and emotional strengths, challenges and experiences so we can support you and your family appropriately.

How would you best describe your child? (Likes, dislikes, temperament, strengths, challenges)

Please provide information about your child's social development and experiences. (Other childcare or group experiences, how your child relates to other children and adults).

Please indicate any special interests, expertise, or passion areas you have and/or activities you enjoy with your child:

Does your child have any allergies, dietary restrictions or health conditions that we should be aware of ?

No _____ Yes _____ Please list: _____

How did you hear about Bixby School? (Check all that apply)

_____ Friends/Family (name optional) _____

_____ Ad in _____ (publication)

_____ Website

_____ Community event

_____ Other _____

Signature _____

Date ____/____/____

** Upon confirmation of enrollment, a tuition deposit and facilities fees are also due. Please refer to the tuition information on our website or in your Bixby folder for details.

Please submit in person, mail or fax completed form to:

Bixby School

Admissions

4760 Table Mesa Drive, Boulder, CO 80305

Phone: 303/494.7508 Fax: 303/494.7519

www.bixbyschool.org

OFFICE USE ONLY

Date of Tour _____

Date of Enrollment _____

Date \$100 Application Fee Paid _____

Date Tuition/Facilities fees Deposit Paid _____