FACS Exploration Preschool Registration

Dear Parents,

Our FACS Exploration B class is studying childcare. We plan to hold a preschool here, in our classroom, using information that we have learned during this unit on **Thursday, November 30th and Friday, December 1st.** Children ages 3 to 5 are invited to come and spend a class period with our students. Students will entertain the children with learning activities (songs, art, games, and stories) and a snack will be served.

Our preschool times are as follows:

Period B8 Thursday November 30th 1:10pm-1:55pm

Period A1 Friday December 1st 8:00am-8:45am

Period A2 Friday December 1st 9:30am-10:15am Period A3 Friday December 1st 11:40am-12:25pm

The preschoolers need to be dropped off before the **beginning** of the time stated and picked up at the **end** of the time stated. FACS students will be waiting in the front parking lot (by the main entrance) to escort their preschoolers to and from the preschool room. Preschoolers **cannot** stay at school for any other classes or ride the school bus home for liability reasons. If you are unable to arrange for transportation for your preschooler at the end of the period, they will not be able to participate. Please note bringing a preschooler is optional and not mandatory for FACS Exploration students.

Thank you in advance for your willingness to help us in this fun and

educational class activity. If you have any questions, please

e-mail me at abraswell@alpinedistrict.org

------------------------------ Send the bottom back to school **by Tuesday, November 21st** ---------------------------------------

I allow permission for my preschooler to attend on:

\_\_\_\_\_\_\_\_\_ Thursday, November 30th

\_\_\_\_\_\_\_\_\_ Friday, December 1st

Preschooler’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_

Parent of Preschooler’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FACS Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Period: \_\_\_\_\_\_\_\_\_

My preschooler has the following allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_