



Child's Full Name_____

Date of Birth_____ Gender: M or F

School District Residence_____

Mother's Name_____

Address_____ City_____ State____ Zip_____

Phone_____ Email_____

Father's Name_____

Address_____ City_____ State____ Zip_____

Phone_____ Email_____

Will your child need bussing? Yes or No

Does your child need screened for special services? Yes or No

Concerns:_____

Preferred Time: (Please circle)

AM (8:00-11:00)

PM (12:00-3:00)

No Preference

Preschool is \$150.00 per month with a \$25 registration fee.

If you would like to apply for free/reduced preschool tuition please submit 2 recent pay stubs from everyone in your household.

Please drop off or mail application and \$25 registration fee to:

Ridgedale Elementary School

3105 Hillman Ford Rd.

Morral OH 43337

Questions please call Ms. Outcalt 740.383.2020 ext.109
or email routcalt@ridgedaleschools.org

*****Preschool students must be potty trained*****