

Prekindergarten Registration Lottery Ticket 2017-2018

The lottery drawings will take place at either Lanier Primary School or the Richmond Hill Pre-K schools on the following dates.

*Lanier Primary School Pre-K on April 3, 2017 at 4:00 PM.

*Richmond Hill Primary School Pre-K on April 5, 2017 at 4:00 PM.

*McAllister Elementary School Pre-K on April 6, 2017 at 4:00 PM.

All registration documents must be received by March 31st at 3:00 PM to be included in the drawing. All children not chosen at the drawing or who register after March 31st will be placed on a waiting list until spaces become available.

Please complete the lottery ticket below for the drawing. If you have twins, please list both names on the "child name" line.



Please circle the Pre-K name Lanier Primary Richmond Hill Primary McAllister Elementary

Child Name _____ Twins? Yes No

Parent Name _____

Address _____

Subdivision Name (South End Schools Only) _____

Home Phone _____ Cell Phone _____

Parents will need to bring the following documents in order to be eligible to participate in the lottery process (your application is not considered accepted until it has been received by the Project Director with the following documents)*

*2017-2018 Prekindergarten application

*Original certified birth certificate (proof of age requirement)

*Proof of residency, include two (electric, gas or water bill, apartment lease, mortgage statement, or house contract).
Parents may only register at the school that serves their legal address.

*Once your application has been accepted in the lottery drawing additional registration forms will be required to participate in the program.

failure to comply with these attendance requirements could result in disenrollment. I understand that I cannot register my child without appropriate age documentation. I have attached a copy of appropriate age documentation to this registration form.

SIGNATURE (Parent/Guardian): _____

DATE: _____

CHILD MAINTENANCE

CHILD'S LIVING ARRANGEMENTS: BOTH PARENTS MOTHER FATHER OTHER

CHILD'S LEGAL GUARDIAN: BOTH PARENTS MOTHER FATHER OTHER

THE CHILD MAY BE RELEASED TO THE PERSON(S) SIGNING THIS AGREEMENT OR TO THE FOLLOWING:

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>	<u>CELL PHONE</u>
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1.

2.

3.

4.

CHILD'S PHYSICIAN OR CLINIC'S NAME (CHILD'S PRIMARY HEALTH SOURCE): _____

DATE OF LAST FULL HEALTH SCREENING: _____ PHONE: ()

MY CHILD HAS THE FOLLOWING SPECIAL NEED(S):

THE FOLLOWING SPECIAL ACCOMMODATION(S) MAY BE REQUIRED TO MOST EFFECTIVELY MEET MY CHILD'S NEEDS WHILE AT THIS CENTER:

MY CHILD IS CURRENTLY ON MEDICATION(S) PRESCRIBED FOR LONG-TERM CONTINUOUS USE AND/OR HAS THE FOLLOWING PRE-EXISTING ALLERGIES, ILLNESS, OR HEALTH CONCERNS:

GENERAL RELEASE

I verify the above information to be correct and true. I hereby grant permission for the information provided in the preceding Registration Form to be distributed to Pre-K providers, the Department of Early Care and Learning (DECAL), and certain agencies or those entities contracted by Pre-K providers or DECAL which shall include, but not be limited to, the Georgia Department of Education, and colleges/universities.

SIGNATURE (Parent/Guardian): _____

DATE: _____

PHOTOGRAPH/VIDEOTAPE RELEASE

I hereby grant permission for the Pre-K provider specified below, the Georgia Department of Early Care and Learning (DECAL) and certain agencies or entities contracted by the Pre-K provider or DECAL which shall include, but not be limited to, the Georgia Department of Education, and colleges/universities, to record the participation and appearance of my child, _____, by photograph and/or videotape in connection with daily Pre-K activities for the purposes of news releases, reporting, and assessing the progress of children and the program. DECAL and its contractors are authorized to exhibit or distribute such photograph(s) and/or videotape in whole or in part without restrictions or limitations for any educational or promotional purpose that DECAL deems appropriate. Such photograph(s) and/or videotape may, for example, appear in printed or visual materials for DECAL and/or on DECAL's web site.

The undersigned hereby jointly and severally releases, acquits, forgives, and discharges the Pre-K provider, DECAL, and other entities contracted by the Pre-K provider or DECAL, from any actions, agreements, claims, controversies, demands, judgments, liabilities, proceedings, and suits, whether arising in equity or in law regarding such participation and appearance by said child.

This release shall remain binding upon all successors in interest and personal representatives of the parties, to the extent permitted by law.

PRE-K PROVIDER NAME/ADDRESS: _____

SIGNATURE (Parent/Guardian): _____

DATE: _____