

# Ypsilanti Cooperative Preschool Application

## INFORMATION ABOUT YOUR CHILD

Child's Name \_\_\_\_\_ Birth date: \_\_\_\_\_  
Child's Nickname \_\_\_\_\_ Child's sex M F  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone # (\_\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

**Please circle the class you prefer**      3-year-old's Class (T & Th 8:45-11:45 AM; child turns 3 by December 1st)  
4-year-old's Class (M-W-F 8:45-11:45 AM; child turns 4 by December 1st)

## INFORMATION ABOUT YOUR FAMILY

Parent/caregiver name \_\_\_\_\_  
Employer \_\_\_\_\_ Work phone # (\_\_\_\_\_) \_\_\_\_\_  
Occupation \_\_\_\_\_  
How long have you lived in Michigan? \_\_\_\_\_

Parent/caregiver name \_\_\_\_\_  
Employer \_\_\_\_\_ Work phone # (\_\_\_\_\_) \_\_\_\_\_  
Occupation \_\_\_\_\_  
How long have you lived in Michigan? \_\_\_\_\_

Name(s) and age(s) of siblings:  
\_\_\_\_\_

## YCP JOB PREFERENCES

**Please list any special skills or qualifications that might make you well suited to a particular position. At least one of your three choices MUST be a board or fundraising position. Every effort will be made to balance your choices with the needs of the preschool. Jobs are listed on website.**

Job choice	Qualifications
(1) _____	_____
(2) _____	_____
(3) _____	_____

YCP Membership will contact you via email on the status of your application. Please complete this application and include the \$35 registration fee payable to "Ypsilanti Cooperative Preschool". Mail them both to:

**Jenny Vroom  
4852 Club Pl.  
Ypsilanti, MI 48197**

Questions? Please call **Jenny Vroom** at 734-678-0222 or email her at: [vroomjenny@gmail.com](mailto:vroomjenny@gmail.com)  
For more information, you can also visit the YCP website: <http://www.ypsicoop.org>

**How did you hear about Ypsi Co-op?** \_\_\_\_\_

*Ypsilanti Cooperative Preschool admits students of any race, sex, color, and national or ethnic origin.*