

**TUESDAY  
SCHOOL  
REGISTRATION  
MATERIALS  
2009 - 2010**

North Campus  
Of  
Fairfield Christian Church

3420 Blacklick Eastern Rd. NW  
Baltimore, Ohio 43105  
Telephone (740) 862-6245

# North Campus of Fairfield Christian Church 2009-10 TUESDAY SCHOOL

## GENERAL INFORMATION

Tuesday School is a weekly program designed to teach and relate Biblical truths to preschool children, ages 3 years old to 5 years old. Each morning includes a Bible lesson, craft, music and movement, author's corner and snack. Qualified parent volunteers provide the instruction and activities for the weekly Tuesday School program.

Our Tuesday School program will meet at North Campus of Fairfield Christian Church on Tuesday mornings from 9:30 AM to 11:30 AM. Our school year will begin in **September** and will conclude in **May**.

**Children must be 3 years old by August 31, 2009 to enroll.** Registration applications will be accepted on a first come first serve basis as class rosters are limited to 14 children in the 4 year old class room and 10 children in the 3 year old class room.

You will be notified by mid-July of your child's acceptance into our Tuesday School program. Upon acceptance, more information and class room assignment will be mailed in August.

## TUITION AND SUPPLIES

Tuition for the entire 2009-2010 is \$100 per child payable with the Registration application. Tuition is waived for parents who agree to volunteer to work in our Tuesday School program every week. Please refer to the Volunteer section for more details.

In order to keep our tuition so low, we ask that you provide the following class room supplies:

- One 8-pack of washable markers
- 1 box tissues
- 1 four pack Play Dough OR 1 preschool Bible story book  
(help build our library – this book will not be returned)
- 2 glue sticks
- Canvas tote bag (no zippers please)
- 3 boxes Snacks consisting of crackers, vanilla wafers, pretzels, gold fish etc.

## TUESDAY SCHOOL LOCATION AND CONTACTS

North Campus is located at 3420 Blacklick Eastern Rd. NW (St. Rt. 204) in Baltimore, Ohio. The church is four miles north of Baltimore and a few miles east of Pickerington North High School on Refugee Rd. If you have any questions, please contact Janeen Politza, Tuesday School Director, at Fairfield Christian Church, North Campus (740) 862-6245.

# North Campus of Fairfield Christian Church 2009-10 TUESDAY SCHOOL REGISTRATION

CHILD'S NAME \_\_\_\_\_ SEX \_\_\_ BIRTHDATE \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIPCODE \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME PHONE NUMBER \_\_\_\_\_ CELL PHONE NUMBER \_\_\_\_\_

Do you have a church home? Yes \_\_\_ No \_\_\_ Where \_\_\_\_\_

\*\*\*\*\*

**Person to be contacted in case of emergency if parent cannot be reached:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS \_\_\_\_\_

RELATIONSHIP TO CHILD \_\_\_\_\_

\*\*\*\*\*

## Permission to Transport Child

I give North Campus of Fairfield Christian Church permission to transport my child named above to CHILDREN'S HOSPITAL, Columbus, Ohio, for emergency medical care or to \_\_\_\_\_ for emergency dental care, or to the nearest available source of emergency assistance.

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

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PLEASE RETURN THIS REGISTRATION APPLICATION AND  
\$100 TUITION MADE PAYABLE TO:  
NORTH CAMPUS FAIRFIELD CHRISTIAN CHURCH  
Attention: Janet Duncan  
3420 Blacklick Eastern Rd. NW, Baltimore, Ohio 43105



**North Campus Fairfield Christian Church  
TUESDAY SCHOOL  
2009- 10 Health Records**

**CHILD'S NAME** \_\_\_\_\_ **SEX** \_\_\_ **BIRTHDATE** \_\_\_\_\_

1. List all allergies and any special precautions and treatment indicated for these allergies. (E.G. foods, medications, or environmental allergies)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List medications: including food supplements, modified diets or fluoride supplements currently being administered to the child.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. List any chronic physical problems and any history of hospitalization.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. List any diseases the child has had.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Immunization Record. Enter month/day/year of each immunization.

DTP..... 1\_\_\_\_\_ 2\_\_\_\_\_ 3\_\_\_\_\_ 4\_\_\_\_\_ 5\_\_\_\_\_\*

Polio.... 1\_\_\_\_\_ 2\_\_\_\_\_ 3\_\_\_\_\_ 4\_\_\_\_\_\*

MMR(combined) \_\_\_\_\_

Measles (separate)\_\_\_\_\_ Mumps (separate)\_\_\_\_\_ Rubella (separate)\_\_\_\_\_

HIB..... 1\_\_\_\_\_ 2\_\_\_\_\_ 3\_\_\_\_\_ 4\_\_\_\_\_

HEP B... 1\_\_\_\_\_ 2\_\_\_\_\_ 3\_\_\_\_\_ 4\_\_\_\_\_

\*5<sup>th</sup> DTP and 4<sup>th</sup> Polio are normally given just prior to Kindergarten

\_\_\_\_\_

Signature of Parent or Guardian

Date