

Office Use Only:

Registration Fee Paid: Check #/ACH: _____ Amt.: _____ Cash Amt.: _____ Date of Registration: _____

REGISTRATION FEE IS PAYABLE AT TIME OF REGISTRATION AND IS NON-REFUNDABLE.

Supply Fee Paid: Check #/ ACH: _____ Amt.: _____ Cash Amt.: _____ Date Enrollment Fee Paid: _____

ENROLLMENT FEES ARE DUE IN FULL BY JULY 15 AND ARE NON-REFUNDABLE.

REGISTRATION # _____

**DISCOVERY SCHOOL of SAN ANTONIO, INC.
REGISTRATION
2025 - 2026**

CHILD'S NAME _____ M _____ F _____

DOB _____

AGE AS OF SEPT. 1, 2025 _____ YRS _____ MOS

ADDRESS _____

CITY _____ ZIP _____

PRIMARY PHONE: _____

CLASS REQUEST (MARK 1ST AND 2ND CHOICE):

2's: _____ 2 DAY 2 1/2's _____ 2 DAY
 _____ 3 DAY _____ 3 DAY
 _____ 2 DAY + 3 DAY _____ 2 DAY + 3 DAY

3's _____ 2 DAY 4's _____ 2 DAY
 _____ 3 DAY _____ 3 DAY
 _____ 5 DAY _____ 5 DAY

KINDERGARTEN _____ 1ST GRADE _____

PARENT/GUARDIAN _____ **PRIMARY PHONE** _____

ADDRESS _____ **SECONDARY PHONE** _____

(if different from child's)

EMAIL: _____

OCCUPATION _____

PARENT/GUARDIAN _____ **PRIMARY PHONE** _____

ADDRESS _____ **SECONDARY PHONE** _____

(if different from child's)

EMAIL: _____

OCCUPATION _____

Child lives with ___ both parents ___ Mother ___ Father ___ Guardian Custody documents on file (if applicable) ___ Yes ___ No

Please list the names and phone numbers for all those (other than parents/guardians) who have authority to pick up your child: (Children will only be released to a person designated by the parent/guardian and after verification of ID)

1. I have received a link to the Discovery School Parent Handbook, By-laws, Guidance and Discipline Policy, Food and Nutrition Policy, Health Guidelines, and Emergency Preparedness Plan, and agree to cooperate with the policies and procedures of Discovery School.
2. **I understand that I must notify Discovery School in writing 30 days prior to withdrawal, and that registration and supply fees are non-refundable.**
3. My child has permission to participate in all School activities. I understand that Discovery School is not liable for accidents.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

SIGNATURE OF DIRECTOR

DATE