

Fort Stewart/HAAF CY5 Pre-K Lottery Sign Up

Pre-K Student Information – Please complete for each child.

First Name: _____ Last Name: _____ MI: _____

DOB: _____ Age on Sept. 1st: _____ Gender: _____

Phone Number: () _____ Cell Phone () _____

Email: _____

Home Address: _____

City: _____ State: _____ County: _____

Sponsor's Name _____ Rank: _____ Unit: _____

Spouse's Name _____ Rank: _____ Unit: _____

Are you currently registered with Fort Stewart/HAAF CY5?

_____ YES _____ NO _____ DON'T KNOW

Does your child have any Special Needs or Medical Issues?

_____ YES _____ NO _____ DON'T KNOW

***Note: If your child has any special needs or medical conditions you MUST attend the Multi-Disciplinary Assessment Team (MIAT) meeting prior to attending the Pre-K program. NO EXCEPTIONS!!!

Disclosure: Submission of this form is for the lottery drawing only! There is no guarantee that your child will be selected. If selected, a total of three (3) attempts will be made to notify you of your child's selection. After the third attempt, if we are unable to get in touch with you, the space will go to the next child on the list. If you are still interested, you will need to place your child's name on the waiting list.

Parent's Signature: _____ Date: _____

CYS Staff Signature: _____