



Southland School Readiness Registration
(Must be 4 by September 1st, 2026)

Child's Name _____

Child's Birthday _____

Mom's Name _____ Phone _____

Email _____

Dad's Name _____ Phone _____

Email _____

Child's Address _____ City _____

Child lives with: both parents mom dad other

Emergency Contact: _____ Phone Number: _____

Does your child have any allergies/medical needs? Please explain

Please rank which class you prefer

Monday/Wednesday/Friday 8:00am-11:00am

Monday/Wednesday/Friday 12:00pm-3:00pm

Will your child be riding the bus yes no

Provided either to or from school at the beginning or end of the regular school day

Will your child be using van transportation? yes no

The district ONLY provides mid-day transportation to/from daycares within the Southland School District.

Name of Daycare Provider & address _____

Parent Signature: _____ Date: _____

Return to Southland Early Childhood 312 West Main St. Adams, MN 55970 with your \$25.00 fee by May 1st, 2026

Date Received _____

Check # _____