2026-2027 Rock Ridge School District #2909
Early Childhood Family Education Registration
Student Registration Information

Class 1	Tuesday	8:30 -10:00	Baby Class (see schedule)	Birth-Not Yet Walking	Virginia
Class 2	Tuesday	8:30 -10:00	Cooking Class (see schedule)	18 months-5 Years	Virginia
Class 3	Tuesday	8:30 -10:00	Messy/Gym (see schedule)	18 months-5 Years	Virginia
Class 4	Tuesday	8:30 -10:00	Gardening(see schedule)	18 months-5 Years	Virginia
Class 5	Wednesday	8:30 -10:00	Toddler time	12 months-36 months	Virginia
Class 6	Thursday	8:30 -10:00	Bright Beginnings	Birth-5 Years	Virginia
Class 7	Friday	8:30 -10:00	Play and Learn	Birth-5 Years	Eveleth
Class 8	Friday	10:30 -12:00	Play and Learn	Birth-5 Years	Eveleth

Children participating need to be age by September 1. **Note: Schedule subject to change due to enrollment.**

RESIDENT INFORMATION

Are you a resident of Rock Ridge? Yes No If no, in which school district do you reside?

Student resides with: __Mother & Father __Mother Only __Mother & Stepfather __Father Only __Father & Stepmother __Other (please list)	Address City State Zip Code Home Phone County
Parent # 1 Information	Parent #2 Information
Name	Name
Home Phone	Home Phone
Email Address	Email Address

STUDENTS THAT WILL ATTEND ECFE

					enter class number from above		
					Fall	**Winter**	**Spring**
CHILD 1:			M/F	Date of Birth: —- / — / —			
Last	First	Middle	Circle One				
CHILD 2:			M/F	Date of Birth: — / — / —			
Last	First	Middle	Circle One				
CHILD 3:			M/F	Date of Birth: — / — / —			
Last	First	Middle	Circle One				

CLASS FEE INFORMATION

Fees: per trimester

Income	1.5-hour class	Specialty (per trimester)	Additional Child Fee
$80,000+	$100	$50	$50
$60,000-$79,999	$75	$37.50	$37.50
$45,000-$59,999	$50	$25	$25
$25,000-$44,999	$25	$12.50	$12.50
$Under $25,000	$5	$6	$2.50

PAYMENT PLAN: **Fee enclosed** Fee reduction-able to pay $

NO FAMILY WILL BE DENIED PARTICIPATION DUE TO INABILITY TO PAY THE CLASS FEE.
Electronic payment options are available through the Community Education Portal at rrps.org
Checks made payable to ISD #2909.

RETURN COMPLETED REGISTRATION AND FEE TO: Rock Ridge Early Childhood ATTN: ECFE, 506 9th Ave. N., Virginia, MN. 55792

INFORMATION: Call 218-742-3805 or shanon.kush@rrps.org

DEPARTMENT OF EDUCATION

Early Learning Services
1500 Highway 36 West Roseville, MN 55113-426

Early Childhood Family Education and School Readiness Parent Questionnaire

Help us learn about your child and family. Neither you nor your child will be identified in any published report. If you wish not to take part in this questionnaire, it will not prevent you or your child from taking part in any program or service. All data is protected by state and federal data privacy standards.

If you choose to answer the questions, your information will be used by your local school district and the Minnesota Department of Education for program planning. None of your personal information will be published.

Thank you for helping improve public services.

1. **Relationship to child**

   ____ Mother
   ____ Father
   ____ Mother's significant other
   ____ Father's significant other
   ____ Grandmother
   ____ Grandfather
   ____ Court Appointed Guardian

2. **Your highest level of school completed. Mark only one.**

   ____ No school completed
   ____ Preschool
   ____ Kindergarten
   ____ Grade: _____
   ____ High School Diploma/GED
   ____ Some college but no degree
   ____ Other
   ___ Career & Technical Education Certificate
   ___ Associate's Degree
   ___ Bachelor's Degree
   ___ Master's degree
   ___ Ph. D.

3. **Your Date of Birth (Month/Day/Year) _____/_____/_____**

4. **What is your household's* total yearly income (including farm income, child support/alimony, pension/retirement, disability, and unemployment and veterans benefits) before taxes, rounding to the nearest thousand? $_____**

   *Members of your household are anyone living with you and shares income and expenses, even if not related.

5. **How many people lived in your home last year? Choose one.**

   2 3 4 5 6 7 8

For school use only: _____