



windfall
preschool Peer Application

Please complete and return this form to:
Windfall School, Medina County Board of Developmental Disabilities,
4691 Windfall Road, Medina, Ohio 44256.

Once we receive your application, you will be contacted regarding a visit and screening date for your child.

Questions? Please contact Children's Services at 330-725-7751 option 1.

Child's Name: _____

Street Address: _____

County: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Age: _____ Date of Birth: _____ Gender : ____ male ____ female

Mother's Name _____ Phone: _____

Address (if different from child's) _____

Father's Name _____ Phone: _____

Address (if different from child's) _____

Siblings: Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Family Members Served by the Medina County Board of DD (if any) _____

Has your child attended preschool previously? ____ yes ____ no

Peers will attend Windfall Preschool on Wednesdays, Thursdays, and Fridays from 8:30 a.m. - 12:30 p.m.

Parent/ Guardian Signature _____ Date _____



How did you hear about Windfall Preschool?
