



Pre-School Registration Form

Child's Name: _____ DOB: _____

Name Child Goes By: _____

Address: _____ Home Phone: _____

City: _____ Zip Code: _____

Mother's Name: _____ Cell/Work: _____

Father's Name: _____ Cell/Work: _____

Mother's Email: _____ Father's Email: _____

Class Choice (Indicate 1st and 2nd choice where appropriate):

Half-Day Classes (8:30 – 12:30) (Age on 9/1/12)

_____ M, W, F (2s, 3s, 4s, 5s)
 _____ M/W (1s)
 _____ T/TH (1s, 2s, 3s)
 _____ Friday (1s)
 _____ M – F (2s, 3s, 4s, 5s)

9 Monthly Payments:

_____ \$235.00
 _____ \$195.00
 _____ \$195.00
 _____ \$100.00
 _____ \$295.00

Please read and sign below that you have read and agree to the following items:

- * There is a registration fee of \$100 due with application. *This fee is non-refundable.*
- * There is an Activity Fee of \$50 for all classes. This fee is due with your first tuition payment. *This fee is non-refundable.*
- * Tuition is paid in 9 payments (August 1st-April 1st). You may withdraw from the program with a 30 day written notice through January 1, 2013. After January 1, 2013, all tuition for the year must be paid, even in the event of withdrawal from the program.
- * Children in the three-year old program must be potty trained by the start of school.

Emergency Contact if the Parents cannot be reached:

Name: _____ Phone: _____

Person's authorized to pick up your child from school (ID will be required):

Please list any medial conditions or allergies. This includes physical, social, or emotional issues, including any educational or psychological testing your child may have received. Please indicate below if your child has ever been asked to leave another preschool program.

Date: _____
Parent Signature

“ I have called you friends, for everything that I learned from my Father I have made known to you.” John 15:15b