

Friendship Christian School

School Campus 3160 Old Atlanta Rd Suwanee, GA 30024

Becky Holmes Director 678-360-3837 (Direct) 678-845-0418 (School)

Pre-School Registration Form (201	9-20)
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:	
We enroll children ages 2-5. All classes are	assigned by the age of the child on September 1, 2019.
with a 30 day written notice through Janu 30 day notice period. After January 1, 202 withdrawal from the program. * FCS uses the FACTS tuition management for FACTS. The cost is approximately \$45 period *Students in the 3 year-old program should be students.	th application. This fee is non-refundable. om August 1 st -May 1 st . You may withdraw from the program ary 1, 2020. You are responsible for all tuition due through the 20, all tuition for the year must be paid, even in the event of at program to collect tuition. All families are required to register per year for this service, payable directly to FACTS. d be potty-trained by the start of school in August.
Emergency Contact if the Parents cannot Name:	Phone:
	orized to pick up your child from school (ID will be required):
	od restrictions. This includes physical, social, or emotional issues, g your child may have received. Please indicate below if your child has am.
	Date:
Parent Signature	