



Christian Preschool

Registration/Enrollment Form

Please turn this form in as soon as possible with your registration fee to insure your child's placement.

Please indicate your plan for a daily schedule. This form does not imply acceptance to the particular program desired. All openings will be filled according to ages of the children in classroom, days available and date entered on this form. We accept children ages 2 – 6 years of age, Child must ***not have*** entered Kindergarten before.

Date: _____

Child's Name _____ Birthday _____

Address _____ Zip Code _____ male female

Phone(Home) _____ Phone(Work) _____

Phone(Cell) _____ Email _____

Name of Both Parents _____

Please indicate ***ALL*** allergies your child has _____

Is your child potty trained? yes no

Registration Fee (enclosed with this form) yes no
\$145.00 (non-refundable) _____ initial here.

**Please indicate by a check next to the Days and Session you are interested in...*

Days: 2 Days (T/TH) 3 Days (M/W/F) 5 Days (M-F)

Session: Full Days (8:30 am 3:00 pm) All Day (6:30am – 6:00 pm)

All changes in schedules or withdrawals, whether before the school year begins or during the year, must be made in writing with a two-week advance notice, and shall be effective when such notice is delivered to the school. _____ Initial Here

OFFICE USE ONLY

Registration Fee \$ _____ Paid with ck# _____ cash _____ credit card _____

Classroom assignment _____ Date Starting _____



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