

## **Registration Form**

Child's Name		
Child's Birth Date	Child's Gender N	1 F
Child's Street Address		
City	State Zip	
Mother's Name  Mother's Contact Info:		
Home Phone	Work Phone	
Cell Phone	E-mail	
Father's Name Father's Contact Info:		
Home Phone	Work Phone	
Cell Phone	E-mail	
Guardian's Name (if applicable)		
Guardian Contact Info (if applicable):		
Home Phone	Work Phone	
Cell Phone	E-mail	
Do you want to be included in an e-mail di	stribution list? Yes	No
If yes, which e-mail address(es) should be u	sed?	
Custodial Parent (if applicable – check one	) MotherFather	
<b>Days requested for enrollment (check prefe</b> **A 2 day/wk schedule is only an option for the 2 ½ - Y		
MondayTuesdayWednesc	ayThursday	

Registration fee of \$75 (\$50 for each add'l child) must be submitted with this form. A spot will not be held for
your child until the enrollment deposit has been paid. The enrollment deposit covers tuition for the first week of
the school year (the last week of August) and other registration fees.

The registration process is not complete until all fees have been paid and the forms listed below have been completed and returned.		
Registration Form Getting to Know You Child Medical Statement		
Child Enrollment and Health Information Parent/Guardian Agreement & Release Form		