

Please submit this form and \$75 to ensure placement.



## Preschool Registration 2020-2021

Parents' Names: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Does your child live with both parents? Yes/No

Child's Birthday: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone #1: \_\_\_\_\_ Cell Phone #2: \_\_\_\_\_

Classroom Choice (please rank in preference order)

3 day 3 year old (morning) \_\_\_\_\_

3 day 4/5 year old (morning) \_\_\_\_\_

4 day 4/5 year old (morning) \_\_\_\_\_

Office Use

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Official Initial: \_\_\_\_\_

**\*We cannot guarantee placement in a certain class until we make sure we have the class numbers. Please note that the classes are filled on a first come, first serve, basis.**