Sex



Date of Birth

Child's Full Name (*Please put any nickname in quotes if you prefer we use any name other than* 

Full Address		Family Home Phone
Allergies or Medical Conditions	Physician's Name & Phone Number	
Pare	nt or Guardian Information	
Mother Full Name	Employer	Work Phone
Full Address if different from Child		Cell phone
Father Full Name	Employer	Work Phone
Full Address if different from Child		Cell Phone
Email Addresses (please specify)		
	rgency Contact Information	
(Must list	full information for 2 contact	tts.)
Full Name (Please put full name we can match to a driver's license or other formal picture ID)	Full Address	Phone
Full Name (Please put full name we can match to a driver's license or other formal picture ID)	Full Address	Phone
Additional people who have your permission to pick of	Lup your child. We will ask for their photo ID	to verify upon pickup before releasing your child.



		Classes	Offered	
5	Day 4's (Pre-K)	.M-F	\$400.00/month	9:10-1:30
4	Day 4's (Pre-K)	.M-TH	\$350.00/month	9:00-1:20
3	Day 3's	.M,W,F	\$270.00/month	9:20-1:10
2	Day 3's	.T & TH	\$220.00/month	9:20-1:10
2	Day 2's – Choose from c	one of the	options below:	
<ul> <li>All tuition</li> <li>A prorate Families of A Grace L</li> <li>Please</li> <li>A \$50.00 within a fee</li> </ul>	skill development, crafts, ption B: 24-30 months (Birth dates from April 1- This will be a toddler soci motor play and storytime installments are divided n d charge of one week will l o not need to purchase an utheran Preschool shirt w e circle your child's shirt size conrefundable registration amily will have a registration and to grant your requests of tea	r 1, 2021-Noschool class whole and T & TH Sept. 30, 20 and group where the added to sept the sept to the infee is due to fee of \$100 fee o	March 30, 2022) Is that includes social emote small group activities, & \$100.00/month (022) Is the emphasis on social emote of September — May for August along with a supplies. Inded in your supply fee 2024-25 school year: Inded upon registration of e 635.00.	9:00-10:30  otional development, gross  or your payment convenience. \$40.00 supply fee.
Parent or Guardian Signato	ıre		Da	ate
places within a sho	the undersigned, agree to t distance from the presch Library, Discovery Museu	ool buildii	teachers to take my chi ng which include but ar	
Parent Signature for Walk	off School Property			
Registration Fee	Birth Certificate	In	nmunization Record	