

TODAY'S DATE

Cornerstone Preschool

2026 - 2027 Registration Form

Child's Name _____ **BIRTHDAY** _____ Boy/Girl? _____
Address _____ (Name to use in Class) _____
Primary Phone _____ E-mail address _____

ALLERGIES _____

Mother's Name _____ Cell Phone _____
Employer _____ Work Phone _____
Father's Name _____ Cell Phone _____
Employer _____ Work Phone _____

IN CASE OF EMERGENCY, PARENTS WILL BE NOTIFIED FIRST; HOWEVER, TWO ALTERNATES ARE NEEDED IF FOR ANY REASON PARENTS CANNOT BE REACHED.

Emergency Contact _____
Phone _____ Relationship to child _____

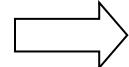
Emergency Contact _____
Phone _____ Relationship to child _____

Other Children in the family:

Name _____ Age _____
Name _____ Age _____

Place of Worship _____

***(If applicable)** Are you planning to send your child to kindergarten 2027-2028 school year?
____ YES (definitely) ____ NO(definitely) ____ MAYBE?? Where _____

*****CLASS OPTIONS ARE LISTED ON THE BACK OF THIS FORM** 

REGISTRATION FEE	\$50.00
Each additional registration	\$30.00
Due at the time of registration and non-refundable	

(Signature of Parent or Guardian)

(OFFICE USE ONLY)

Date of Payment _____ Check/Credit/Cash _____ Amount Paid _____

CLASS ASSIGNMENT _____ DAY(S) _____