

4 YEAR OLD CLASS

WEE BLESSINGS PRESCHOOL REGISTRATION FORM 2018-2019

CHILD'S FIRST AND LAST NAME

CHILD'S BIRTHDATE

HOW WOULD YOU LIKE YOUR CHILD TO WRITE THEIR FIRST NAME?

ADDRESS

CITY

STATE

ZIP

PARENTS/GUARDIANS NAMES

HOME PHONE

E-MAIL ADDRESS

HOME CHURCH (OPTIONAL)

I/We agree that after July 1, registration is assumed to be for the entire year. An early exit fee equal to one month's tuition will be charged if a child is withdrawn during the school year except for conditions of extended illness or family relocation. I/We understand that the first month's tuition is non-refundable.

PARENT/GUARDIAN SIGNATURE

DATE

FOR OFFICE USE ONLY

PAID: YES - NO

Check # _____

Amount \$ _____