

2018-2019 REGISTRATION FOR PRECIOUS PROMISES PRESCHOOL

Date _____

Child's Full Name: _____ Male _____ Female _____

Name to be called at school: _____ Birth Date: _____

Email: _____

Address: _____
(street) (city) (zip code)

Home Phone Number: _____

Mother's Name: _____ Occupation: _____ Cell #: _____

Father's Name: _____ Occupation: _____ Cell #: _____

Program Desired: Please check one line or indicate 1st and 2nd choice

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|--|-------------|---|
| Preschool 2's | <u>full</u> | two-day (T/Th) |
| | _____ | three-day (M/W/F) |
| | <u>full</u> | two-day and three-day (M-F) |
| Preschool 3's
(must be toilet-trained) | <u>full</u> | two-day (T/Th) |
| | _____ | three-day (M/W/F) |
| | <u>full</u> | two-day and three-day (M-F) |
| Preschool 4's | _____ | VPK three-day (M/W/F) 9:00 a.m. - 2:30 p.m. - Parents must also register with the state. |
| Preschool 4's | <u>full</u> | VPK three-day (T/W/Th) 9:00 a.m. - 2:30 p.m. Parents must also register with the state. |
| Preschool 4's | <u>full</u> | VPK four-day (M/T/W/Th) 9:00 a.m. - 1:15p.m. Parents must also register with the state. |
| Preschool 4's | _____ | VPK five-day (M-F) 9:00 a.m. - 12:30 p.m. Parents must also register with the state. |

Church affiliation _____ Are you a member? Yes _____
(of church listed) No _____

How did you hear about our program? _____

Returning Student? Yes No Please list any siblings attending: _____

Please attach registration fee. Checks can be made payable to Precious Promises Preschool.

Registration fees are non-refundable.

Registration Fees: Two-Day & Three-Day Preschool and paid VPK program - \$125.00
VPK program (eligible students) - No charge

For Office Use Only Date Application Received: _____
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