

# 2020-2021 REGISTRATION FOR PRECIOUS PROMISES PRESCHOOL

Child's Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Male \_\_\_\_\_ Female \_\_\_\_\_

Name to be called at school: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Father's Email: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (apt #) (city) (zip code)

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

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Cell #: \_\_\_\_\_

## Program Desired: Please check one line or indicate 1<sup>st</sup> and 2<sup>nd</sup> choice

- Preschool 2's \_\_\_\_\_ two-day (T/Th)
- \_\_\_\_\_ three-day (M/W/F)
- \_\_\_\_\_ two-day and three-day (M-F)
- Preschool 3's \_\_\_\_\_ two-day (T/Th)  
(must be toilet-trained)
- \_\_\_\_\_ three-day (M/W/F)
- \_\_\_\_\_ 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 \_\_\_\_\_ VPK three- day (T/W/Th) 9:00 a.m. - 2:30 p.m. Parents must also register with the state.
- Preschool 4's \_\_\_\_\_ 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: \_\_\_\_\_

If not already on file with the office, please attach Birth Certificate, Certification of Immunization, State of FL School Entry Health Exam Form (both sides completed), and submit 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**

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For Office Use Only Date Application Received: _____
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