



Alum Creek Preschool

Registration Form

Child's Name _____

Child's Birth Date _____ Child's Gender ___ M ___ F

Child's Street Address _____

City _____ State _____ Zip _____

Mother's Name _____

Mother's Contact Info:

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Father's Name _____

Father's Contact Info:

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Guardian's Name (if applicable) _____

Guardian Contact Info (if applicable):

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail _____

Do you want to be included in an e-mail distribution list? _____ Yes _____ No

If yes, which e-mail address(es) should be used? _____

Custodial Parent (if applicable – check one) _____ Mother _____ Father

Days requested for enrollment (check preferences):

A 2 day/wk schedule is only an option for the 2 ½ - Young 3 Yr Old class.

____Monday ____Tuesday ____Wednesday ____Thursday

Registration fee of \$75 (\$50 for each add'l child) must be submitted with this form. A spot will not be held for your child until the enrollment deposit has been paid. The enrollment deposit covers tuition for the first week of the school year (the last week of August) and other registration fees.

The registration process is not complete until all fees have been paid and the forms listed below have been completed and returned.

____ Registration Form ____ Getting to Know You ____ Child Medical Statement
____ Child Enrollment and Health Information ____ Parent/Guardian Agreement & Release Form