FIRST STEPS PRESCHOOL

REGISTRATION FORM

Today's Date: _____

Child's D.O.B.: _____

Child's Name: _____

Last First Middle (Nickname)

Parent's Name (s): _____

Address:_____

Street City Zip Code

Telephone: _____ Previously Enrolled?____ Yes _No

Email: _____

ADMISSION POLICY: The number of participants is limited, so enrollment is based on a first-come, first-served basis. There is a $55.00 non-refundable registration fee for each child. A child must be 3 (three) years of age by September 1, 2013, to enroll in a 3-year old class, and 4 (four) years of age by October 1, 2013 to enroll in a 4-year old class.

The registration fee must accompany this form to confirm enrollment in an assigned class.

CLASS DESIRED: **PLEASE INDICATE A 1ST, 2ND AND 3RD CHOICE**

3-YEAR OLDS

- Mon/Wed 9:00-11:30 A.M.
- Tues/Thurs/Fri 9:00-11:30 A.M.
- Tues/Thurs 12:45-3:15 P.M.

4-YEAR OLDS

- Mon/Wed/Fri 9:00-11:30 A.M.
- Mon/Wed/Fri 12:45-3:15 P.M.
- Mon/Tues/Wed/Thurs 12:45-3:15 P.M.

FOR OFFICE USE ONLY:

Reg. fee paid by: Cash_____ Check_____ (Check #_____)

Date Payment Received: _____

Enrollment confirmed in: MW am _____ MWF am_____ TTF am _____

TT pm _____ MWF pm_____ MTWT pm_____

Wait List Number: 3-year old _____ 4-year old _____

Date child enrolled in program: _____