

For office use only: Date of Registration _____ Days Enrolled in 24/25 _____ # _____
 Teacher 24/5 _____



2025-2026 School Year

Registration Form

Date of Registration: _____

Child's Name: _____ Preferred Name: _____

Birthdate : _____ Age: _____ Gender: _____

Please note to be enrolled in our 3s and Pre-K (4s) Program, housed in the Kirby Building, your child must be fully potty trained, not in a pull up, to attend.

To be enrolled in the Toddler classroom you must be 12 months of age by August 15, 2025 to be eligible to enroll.

Parent's Name: _____

Address: _____ City: _____

Zip: _____ Phone: _____

Email Address: _____

\$75.00 Non-Refundable Registration Fee due at time of Registration
 (\$25.00 for each additional child in same family)

Circle the Program You Desire

Circle the Days You Desire

Toddler and Twos	Monday/Wednesday program Tuesday/Thursday program
3s and Pre-K (4s)	Monday/Wednesday/Friday program Tuesday/Thursday program Monday-Friday program

For office use only: Registration Fee Received _____ Check or Cash
 Child Currently Enrolled _____ Sibling _____ Church Member _____ Public/New _____ # _____