

Preschool Registration Form
School Year 2010/2011

Child's First Name: _____
Child's Last Name: _____ Sex: M / F
Address: _____
City: _____ State: _____ Zip: _____
Email Address: _____
Telephone: _____ Date of Birth: _____
Mother's Name: _____ Father's Name: _____

How did you hear about Carebear Preschool? _____

The class I am registering my child for: _____
The monthly tuition for the class is: _____

I understand that the monthly tuition rate is paid the first of every month regardless of the number of days school is in session or my child attends. _____

Parent Signature

Registration fee: \$150 (non-refundable) paid at time of registration.

What are you hoping your child will learn in preschool? _____

Is there anything about your child that you would like us to know? _____

What are your child's interests? _____

What are your child's strengths? _____