



**Pre-Registration Child Enrollment Form**  
(Additional forms will need to be completed prior to first day)  
**Non-Refundable \$75 Registration Fee, per child**

Child's Name \_\_\_\_\_

Desired Start Date \_\_\_\_\_

Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth/Due Date \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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

Father's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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