

WEST HEMPFIELD CHURCH PRESCHOOL
A Ministry of West Hempfield Presbyterian Church
2019/2020 Contract and Registration Form

Please Print

Child's _____
 First (include nickname) Middle Last

Present age of Child _____ Child's Birth Date _____

Mother's Name _____

Address _____
 Street City State Zip

Home Phone _____ Business # _____ Cell # _____

Father's Name _____

Address _____
 Street City State Zip

Home Phone _____ Business # _____ Cell # _____

In registering my child, I assume responsibility for the monthly tuition charge of \$95.00. Monthly payments (September through May) are due by Wednesday of the first full week of the month. Payments after the 15th of the month will be assessed a \$10 late fee unless other arrangements have been made. Please pay your tuition at the classroom, check made payable to West Hempfield Church Preschool. If tuition payments become one month in arrears, the Preschool reserves the right to cancel the child's enrollment.

Also, I understand that my child must comply with the school rules and regulations. A non-refundable fee of \$30 must accompany this registration. Checks made payable to West Hempfield Church Preschool and should be returned to: West Hempfield Church Preschool, West Hempfield Presbyterian Church, 8 W. Hempfield Dr., Irwin, PA 15642.

Please call the preschool at (724) 863-1260 if you should have any questions about completing this form or if you need any additional information.

I wish to enroll my child for the following class:

_____ Monday/Tuesday/Wednesday 9-11:30 AM or

_____ Monday/Tuesday/Wednesday 12:30-3 PM

Signature of parent or guardian _____ Date _____