## **WEST HEMPFIELD CHURCH PRESCHOOL**

A Ministry of West Hempfield Presbyterian Church 2024/2025 Contract and Registration Form

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.

Please Print				
Child's				
First (includ	First (include nickname)		Last	
Present age of Child	Child	d's Birth Date $\_$		
Mother's Name				
Address				
Street	Ci	ty	State	Zip
Home Phone	Business #		Cell #	
Father's Name				
Address				
Street	Ci	ty	State	Zip
Home Phone	Business #	-	Cell #	
Email:				
I wish to enroll my child	for the following	class:		
Monday/	Tuesdav/Wednes	sdav 9-11:30 A	M or	
Monday/				
A non-refundable fee	·	-		n
Checks should be made with this form to: West West	payable to West	Hempfield Chu ch Preschool	rch Preschoo	
	, PA 15642.			
In registering my child, I \$120.00. Monthly payme the first full week of the	nts (September			
Please pay your tuition Preschool, or online a of the month will be a been made. If tuition reserves the right to	t <u>westhempfield</u> assessed a \$10 la payments becor	<mark>preschool.org</mark> . ate fee unless o ne one month	Payments af other arrange	ter the 15 <sup>th</sup> ements have
Also, I understand that r found in the Preschool Hoof school.				
Signature of parent or guardian		Date		