Algonquin Preschool, Inc. Registration for Enrollment

Child's Name		_ M	. F
Address			
Address(Street) Parent/Guardian Name(s)	(City)	(Zip Code)	
Phone			
Email Address	Child's Birthdate _		
Please indicate class preference*: 1= First C	hoice 2= Secon	nd Choice	
T/TH 3's AM <u>9:00-11:30</u> - \$170 a month			
M/W/F 3's AM <u>9:00-11:30</u> - \$225 a month	or <u>9:00-12:</u>	<u>:00</u> - \$290 a	month
M/W/F 4's AM <u>9:00-11:30</u> - \$225 a month	or <u>9:00-12:</u>	<u>:00</u> - \$290 a	month
M-F 3/4/5's AM <u>9:00-11:30</u> \$325 a month	or <u>9:00-12:</u>	<u>00</u> - \$400 a	month
How did you hear about our school? Friend	Other		
*Your first choice will be accommodated if space in that be assigned. Algonquin Preschool reserves the right to			

A \$60 non-refundable fee payable to Algonquin Preschool is due at time of registration

reasonable circumstance(s).