

\$50 Registration Fee: per child/per program To complete registration: online program selection, hand in this registration form, an submit your registration fee (non-refundable) and first month's tuition payment (non-refundable). Nursery Child should be 30-36 months prior to September 1, 2023 Please check your class choice:		11/
J	submit your registration fee (non-refundable) and	, hand in this registration form, and addirst month's tuition payment
Child should be 30-36 months prior to September 1, 2023 Please check your class choice:	Nursery	\$135.00/month
	Child should be 30-36 months prior to September 1, 2023	Please check your class choice:
Nursery A: Monday/Wednesday 8:55-11:25am Nursery B: Tuesday/Thursday 8:55-11:25am Nursery B Nursery B		1
Preschool \$145.00/mont	Preschool	\$145.00/month
Child must be 3 and fully potty trained by September 1, 2023	Child must be 3 and fully potty trained by September 1, 202	3
Tuesday/Thursday 8:55-11:25am	Tuesday/Thursday 8:55-11:25am	☐ Preschool
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Pre-K:AM or PM \$205.00/month	Pre-K:AM or PM	\$205.00/month
Child must be 4 and fully potty trained by September 1, 2023 Please check your class choice	Child must be 4 and fully potty trained by September 1, 202	Please check your class choice:
Monday/Wednesday/Friday 9:05-11:35am Monday/Wednesday/Friday 12:35-3:05pm ☐ Pre-K AM ☐ Pre-K PM		
Pre-K: Full Day \$345.00/mont	Pre-K: Full Day	\$345.00/month
Child must be 4 and fully potty trained by September 1, 2023	Child must be 4 and fully potty trained by September $1,202$	3
Monday/Wednesday/Friday 9:05-1:35pm Pre-K: Full Day	Monday/Wednesday/Friday 9:05-1:35pm	Pre-K: Full Day

 $^{{}^*}$ Please note, classes will only run if we have enough children registered for the program.

Address:	Phone:	
	Gender: M F	
Primary email for school communication:		
Child's Allergies:		
School District you reside in:		
Child lives with: both parents mother	father grandparents oth	er
Parents are: married separated dive	orced deceased	
Mother's Name:	Father's Name:	
Cell #:	Cell #:	
Work #:	Work #:	
Occupation:	Occupation:	
Employer:	Employer:	_
Address (if different than child):	Address (if different than child):	
Siblings at Jack and Jill:		
Emergency Contacts (if parent(s) are unav	railable): Name and Phone Number	
Any other important information we shoul	d know:	