

BEST BEGINNINGS PRESCHOOL

Alumni 3's

11526 -162nd Avenue NE, Redmond, WA 98052 -- (425) 881-3468

3's Registration Form - 2018/2019

Last Name _____ Child's Name _____

Name Child Uses _____ ☐ Male ☐ Female Birthdate _____

Mother's Name _____ Father's Name _____

Address _____

City _____ State _____ ZIP _____

Home/Primary Phone: _____ Cell/Secondary Phone: _____

Email address: _____

Do you anticipate your child having separation issues? ☐ No ☐ Yes

My child is potty trained (wears underwear & can communicate need to use bathroom): ☐ No ☐ Yes

What is the primary language spoken/understood by your child? _____

Does your child have allergies, dietary preferences, medical or developmental concerns: ☐ No ☐ Yes

If yes, briefly describe: _____

Please indicate 1st and 2nd preference when selecting a class for your child
Tuition is payable over 9 months (September - May)

THREES PRESCHOOL (must turn 3 by 8/31/18 & be potty trained)

☐ M & W, 9:00 - 11:30 AM, \$215/month

☐ T & Th, 9:00 - 11:30 AM, \$215/month

☐ M/W/F, 9:00 - 11:30 AM, \$280/month

☐ T/Th/F, 9:00 - 11:30 AM, \$280/month

To reserve your
child's space, please
return this form
along with your **\$75**
non-refundable
deposit payable to
Best Beginnings
Preschool.

ALUMNI REGISTRATION IS JANUARY 16 - 26, 2018
FOR PRIORITY PLACEMENT, PLEASE TURN THIS FORM IN BY JANUARY 26th.

For office use only:	Transaction Date	Amount	Check #	Ledger Entry
Registration Fee	_____	_____	_____	_____
Confirmation Letter Sent	_____			
First Month Tuition Fee	_____	_____	_____	_____
Comments:	_____			
M/F <input type="checkbox"/>	A/R <input type="checkbox"/>	C/L <input type="checkbox"/>	Student Code	<input type="text"/>