

Best Beginnings Preschool
11526 -162nd Avenue NE, Redmond, WA 98052 -- (425) 881-3468
office@bestbeginningspreschool.com| bestbeginningspreschool.com
3's Registration Form - 2026/2027

Alumni 3's

Child's Name	s Name Birtho				
Preferred First Name		_ Boy Girl			
Parent/Guardian Name	Relationship to Child				
Parent/Guardian Name	uardian Name				
Address					
City	State	Zip Code			
nary Phone Number: Secondary Phone Number:					
Email address:					
Previous student who attended Best Beginning	Js				
Do you anticipate your child having separation	issues? No	Yes			
My child is potty trained (wears underwear & o	can communicate nee	d to use bathroom): No Yes			
What is the primary language spoken/understo	ood by your child?				
Does your child have allergies, dietary prefere	nces, medical or deve	elopmental concerns: No Yes			
If yes, briefly describe:					
3's Preschool students must turn 3 by 8/31/26 & be potty trained and independent in the bathroom. (No pull-ups). Please mark your 1 st and 2 nd class choice.		Please return this form along with your \$150 non-refundable registration fee. Checks or cash only. Please make checks payable			
Monday & Wednesday 9:00 - 12:00	\$310/month	to Best Beginnings Preschool.			
Tuesday, Thursday & Friday 9:00 - 12:00	\$450/month				
Tuition is payable over 9 months (September eguarantee your student's placement. September.	– May). May 2027 Tu ember 2026 Tuition v	uition is due March 31, 2026 to will be collected during the first week of			
Alumni Registration forms will be acc	epted and processe	ed beginning January 12, 2026.			

For office use only:	Transaction Date	Amount	Check #	Ledger Entry
Registration Fee				
Confirmation Letter Sent				
First Month Tuition Fee				
Comments:				
SD Outlook	A/R	Student	Code	