

Four Seasons Preschool Registration

Child's Name: _____

Child's Birth Date _____ Male/Female _____
(Children must be three by the first day of school and potty trained)

Address: _____

City: _____ Zip Code: _____

Phone: Home _____ Work _____ Cell: _____

E-Mail _____

Check the class time you are registering for:

M.W.F. a.m. _____	T.TH. a.m. _____	M.T.W.TH. p.m.. _____
(8:30-11:00 a.m.) \$1609	(8:30-11:00 a.m.) \$ 1072	(12:15-2:45 p.m.) \$2146

A \$100 non- refundable deposit is required to enroll your child.
Tuition is payable in 3 installments.

Please make checks payable to: Royal Oak Recreation

Payment Method

Visa/Discover # _____ CVV2 _____

Mastercard # _____ CVC2 _____

Cardholder Name _____

Cardholder address _____

Expiration Date _____

The City of Royal Oak assumes no responsibility for personal injuries or loss of property while using City or School facilities. It is recommended that anyone enrolled in an activity, or using one of our facilities in general, make provisions to provide adequate coverage within their own family insurance. By registering for Department of Recreation and Public Service programs, registrants realize the inherent risks involved in the programs and appreciate the nature of the risks.

Signature of Parent or Guardian _____

Date _____

