

Date Received: _____

OLDER PRESCHOOL

**Ellisville Weekday Preschool
137 Clarkson Road
Ellisville, MO 63011
REGISTRATION FORM
2015 - 2016**

Child's Name _____ Name Used _____
(First) (Middle) (Last)

Date of Birth _____ Male _____ Female _____

(Father's First Name) (Father's Last Name) (Mother's First Name) (Mother's Last Name)

Address _____
(Street) (City) (Zip)

Email Address _____ Home Phone _____

Cell Phone _____ Work Phone _____

Parent's Church _____ School District _____

Previous Group Experience _____

Age(s) of siblings _____

Member of this Church? (Please circle) Yes No

OLDER PRESCHOOL PROGRAM

Children must be four years old by August 1st.

Days and Times

Tuition

3 – Day Class **Tues., Wed., Thurs. 9:00 – 12:00** **\$235/Mo.** _____

4 – Day Class **Mon., Tues., Wed., Thurs. 9:00 – 12:00** **\$250/Mo.** _____

Registration: A nonrefundable registration, transportation and supply fee of \$100.00 made payable to Ellisville Weekday Preschool should accompany this form. (Parents do not need to provide any supplies or backpacks/tote bags.)

Office Use Only:

D.A. _____

Reg./Supply Fee Pd: _____

Check #: _____

F.S. _____

Date Rec'd. _____