Application for Enrollment

Class preference (please circle one)

T/Th Morning Threes T – F Afternoon Fives

MWF Morning Fours

THE VILLAGE CHURCH PRESCHOOL

Child First name _____ Last name _____

Name we should use _____ Birthdate _____

Home phone _____ Boy _____ Girl _____

Child's address Street _____

City _____ Zip code _____

Family e-mail address _____

Family Information Is parent/guardian a Village Church member? Yes _____ No _____

Child lives with (circle one) Both parents Mother Father Guardian

Mother's name _____ Work phone _____ Cell phone _____

Street _____ Occupation _____

City _____ Zip code _____

Father's name _____ Work phone _____ Cell phone _____

Street _____ Occupation _____

City _____ Zip code _____

I understand that 1) tuition is to be paid by the first school day of each month; 2) tuition cannot be refunded; 3) registration fees and last month's tuition are to be paid at the time of enrollment and are non-refundable. I further understand that my child must be toilet-trained (no diapers or pull-ups) before beginning preschool.

Signature _____ **Date** _____

Extended Preschool Day Options **Please Indicate: ____ No EPD ____ 1 day ____ 2 days**

Mark your first choice. (MWF 4's - Please choose from only one combination of designated days below.) We will accommodate your choice as enrollment allows.

TTH 3's		MWF 4's		MWF 4's		TWTHF PM 5's	
TUES PM		MON PM		WED PM		TUES AM	
THURS PM		WED PM		FRI PM		THURS AM	

Please note that this is an optional half-day program and additional fees apply.

Office use only Date child started school _____

Preschool	Registration fee	Amount	_____	Check #	_____	Date	_____
	May tuition	Amount	_____	Check #	_____	Date	_____
EPD	Registration fee	Amount	_____	Check #	_____	Date	_____
	May tuition	Amount	_____	Check #	_____	Date	_____