Covenant Presbyterian Developmental Preschool Registration Form 2019-2020

Child's Information:			
Full Name:			
Name by which child is called:			
Date of Birth://	Present Age:		-
Address:			
Parent Information:	Father:	Mother:	
Name			
Phone Number			
Cell Phone Number			
Address			
City, State, Zip			
Marital Status			
Email Address			
\$5.00 may be assessed if payment is not received by the 10th of each month. Checks should be payable to <u>Covenant Preschool</u> . I/We understand that a child who is enrolled in the nursery school program is to be enrolled for the entire school year. In the event of withdrawal/dismissal, all sums due and owing for months up to and including the month of withdrawal/dismissal shall be paid. Additionally, a sum equal to 1 month's tuition shall be paid as a withdrawal/dismissal fee.			
Parent Signature:		Date	
Please check your choice:			
Monday/Wednesday Presc	hool 1		
Tuesday/Thursday Preschool 1			
3/day Preschool 2 (TuesTl	hurs.)		
4/day Preschool 2 (TuesF	ri.)		
4/day PreK class (MonTh	urs.)		
5/day PreK class (MonFri.)	* See attached tions	sheet for tui-
Add Extended Day (MonT	hurs.)		