



Little Learners

Christian Preschool & Childcare

OFFICE USE ONLY:

- Date Rcvd _____
- Registration Fee Pd. \$ _____
- Immunization
- Recorded on Class List
- Confirm. Letter Sent

Please fill in all blanks (BOTH SIDES) and please print

Child's Full Name: _____ Boy: _____ Girl: _____

Child's Name to be used at school (nickname): _____

Today's Date: _____ Birth Date: _____ Age: _____

Primary Home Address: _____ City/State/Zip: _____

Child lives primarily with: Both parents/guardians Mother Father

Anticipated Start Date: Immediately Coming Fall Other: _____

Parent or Guardian's Contact Information

Parent / Guardian

Name: _____

Relationship to Child: _____

Home Phone: _____

Cell Phone: _____

Place of Business: _____

Business Phone #: _____

Business Address and Zip: _____

Home Email: _____

Parent / Guardian

Name: _____

Relationship to Child: _____

Home Phone: _____

Cell Phone: _____

Place of Business: _____

Business Phone #: _____

Business Address and zip: _____

Home Email: _____

Emergency Contacts Other Than Parent or Guardian:

Name: _____

Relationship to Child: _____

Home/Cell Phone: _____

Name: _____

Relationship to Child: _____

Home/Cell Phone: _____

Enrollment Request Information:

Session Request: Check the sessions for which you are registering. Enrollment is based upon availability.

Beautiful Babies – Full-Time

Wonderful One's - Ages 18-24 months, Full-Time, (Part-time options possible with an enrolled older sibling)

Terrific Two's / Early Three's

T/Th MWF M-F

8:45-11:45 a.m. 7:30 a.m.-5:30 p.m.

Preschool (Thriving Three's) or **Academy (Fantastic Four's and Five's)**

T/Th MWF M-F

8:45-11:45 a.m. 8:45-2:45 p.m. 7:30 a.m.-5:30 p.m.

Is your child (3 years or older) fully potty-trained? (Yes or No)

