

ENROLLMENT FORM

Child's Last Name

First Name

Boy / Girl

Date of Birth

Name to be used in school

Father's Name

Father's Phone Number

Mother's Name

Mother's Phone Number

Street Address

City

Zip Code

- I agree to:
1. Participate 6 days as a classroom helper.
 2. Pay the registration fee of \$40.00 to guarantee enrollment
 3. Pay tuition of \$130.00 per month- due first class day.

Child's Assignment for 2018 / 2019

____ Threes ____ Fours ____ Fives AM or PM

____ Spanish Club ____ Enrichment Mondays ____ Art Club

Teacher Request (OPTIONAL- consideration will be given whenever possible)

Parent Signature

Return form and registration fee to: Northminster Cooperative Pre-School
104 West Portage Trail, CFO 44223

School use only ____/____/____ # _____ \$ _____