

Name child is to learn to write and recognize _____

Do you have a home church or place of worship? _____

Siblings (Names and Birthdays):

To what extent is your child toilet trained? _____

List any previous Preschool experience. _____

How did you hear about St. Peter's UCC Preschool?

What additional information about your child do you feel would benefit the teacher?

CHECK YOUR ENROLLMENT CHOICE FOR YOUR CHILD
(second choice)

(Indicate first and

Morning Session 9:00 to 12:00 (\$145.00/month) 3 day M-W-F

Morning Session 9:00 to 12:00 (\$115.00/month) 2 day T-R

Afternoon Session 12:45 to 3:15 (\$105.00/month) 2 day T-R

A non-refundable fee of \$40 is required to secure your child's place in class. Please make checks payable to St. Peter's UCC Preschool.

Signature of Parent/Guardian

Date