

For office use:
Registration date _____

First day of attendance _____



Lambs of Christ 2023-24 Preschool Registration Learning Center

Child's name: _____ Date of birth: ____/____/20____

Parent/guardian name: _____

Email address: _____

Telephone number (_____) _____ - _____

Please indicate the days your child will attend **preschool**:

Monday Tuesday Wednesdays Thursday Friday

Extended Care is offered before (6:30-8:30) and after (11:30-5:30) preschool. Indicate the days and times care is needed:

Days	Drop off Time	Pick up Time
<input type="checkbox"/> Monday		
<input type="checkbox"/> Tuesday		
<input type="checkbox"/> Wednesday		
<input type="checkbox"/> Thursday		
<input type="checkbox"/> Friday		

→ Preschool and Extended Care registration is confirmed when the registration fee (one fee per family) and this signed form have been submitted.

→ Parents are assessed tuition and hourly care fees for the days and times indicated on this registration form. A two-week written notice is required to change the schedule.

→ Parents of registered children will be contacted to provide health forms, payment information, and other necessary documentation required for preschool and childcare participants.

→ This registration holds the child's days and times until the school year begins.

Signature of Parent or Guardian

Date