	Start Date: Classroom:	
Toddler/Prescho	ool/Elementary R	Tour Date: Male/ Female (Please circle) egistration Form
Child's Name	Date of Birth	
Parent/Guardian's Name		
Address	City	Zip Code
Phone Numbers (home)	(work/cell)	
E-mail Address		
E-mail Address		
	he program that most full days only for Elemen HALF DAY	•
	9:00am - 12:00pm 3 days a week 5 days a week	
	FULL DAY 9:00am - 3:00pm 3 days a week 5 days a week	
	CTENDED DAY CA Dam - 9:00am / 3:00pm - 6:0	
am daycare pm daycare am & pm da		
Required Fees:		
New Student Registration Fee \$200 Tuition Deposit \$400.00 (<i>non-refu</i> Earthquake Kit \$25.00	indable) in	itial itial itial
Total Amount Paid:	Date:	Check #: