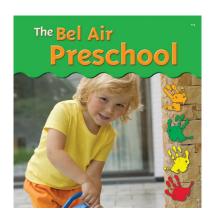


## Preschool Registration Form September 2021—June 2022

Date:		
Name of		
Child		
Birth Date:		
Address:		
Parent Name:		Occupation
Business Address:		
Cell Phone	E-Mail	
Parent Name:		Occupation
Business Address:		
Siblings:		
Name:	Age:	School:
Name:	Age:	School:
What expectations do yo	u have for your child	in our school?



Please share an aspect of your child that you consider unique or special:		
What languages does your family speak at home?		
Please note any health problems or allergies your child has:		
Has your child been Immunized? Yes / No Please list what your child has received		
How did you hear about our school?		
I would like to enroll my child (Beginning Date)		
How many days a week? 9am to 1PM  3 (\$850 a month) or 5 (\$1100 a month)  5 (\$1050 a month) or 5 (\$1300 a month)		
Parent's signature		
Date		
Comments:		



## **Credit Card Payment for Bel Air Preschool**

Name	
Address	
City	ZIP
Credit Card	exp
I give permission for the Bel Ai \$ each month	r Preschool to charge my card (fill in amount)
Signature	
Date	