

ZION CHRISTIAN PRESCHOOL

REGISTRATION FOR 2012 – 2013 SCHOOL YEAR

Child's Name _____ M ____ F ____

Child's Age _____ Child's Birthday _____
Month Day Year

Mother's Name _____

Father's Name _____

Address _____
Number Street City Zip Code

Home Phone _____ E-mail _____

Cell Phone Mom _____ Cell Phone Dad _____

What name do you want us to call your child(nickname or shortened first name)?

_____ To recognize what name in print? _____

What church do you regularly attend? _____

I AM REGISTERING MY CHILD FOR:

_____ 3 Year Old Class (Tues. & Thurs. from 9:00 am ~ 11:30 am)

_____ 4-5 Yr. Old Morning Class (Mon.- Wed.- Fri. from 9:00am ~ 11:30am)

_____ 4-5 Yr. Old Afternoon Class (Mon.-Wed.-Fri. from 12:30pm ~ 3:00pm)

ENCLOSED IS MY \$50.00 REGISTRATION FEE: ____ Check # _____ Cash
(This fee is non-refundable)

Make checks payable to: Zion Christian Preschool
22 N. Second Street
Waterville, Ohio 43566
419-878-3026

Zion Christian Preschool does not discriminate in the enrollment of children upon the basis of race, color, religion, sex, national origin, or disability.