



Registration Form 2018-2019 School Year

To register your child please complete and return this form with the total registration amount to [St. John's Christian Preschool – 1804 Highland Ave. Eau Claire, WI 54701](#)
Class sizes are limited and will be filled on a first-come-first-serve basis.

Child's Name: _____

Child's Birthdate: _____ Child's Age (on 9/01/18): _____ Male _____ Female _____

Child's Shirt Size: youth x-small (4-6) _____ youth small (6-8) _____

Parent's Name: _____

Address: _____
Street City Zip

Phone: _____
Home Cell

Parent's Name: _____

Address: _____
Street City Zip

Phone: _____
Home Cell

Email: _____

| <u>Class</u> (Please check one) | <u>Days</u> | <u>Supply/Registration Fee</u> - Due upon registration. Covers year's supplies & t-shirt Non-refundable | <u>Tuition</u> Due the 7 th of each month September-May Covers monthly program cost |
|---|-------------|--|---|
| ____ 3-4years olds ____ 4-5 year olds (Three days per week) | MWF AM | \$126.00 | \$126.00 |
| ____ 3-4 year olds (Two days per week) | TTh AM | \$89.00 | \$89.00 |

For Office Use

Check No. _____ Date : _____

Amount: _____ Class: _____