



Registration Form 2019-2020 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 9/01/19): _____ 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	\$129.00	\$129.00
____ 3-4 year olds (Two days per week)	TTh AM	\$91.00	\$91.00

For Office Use

Check No. _____ Date : _____

Amount: _____ Class: _____