

FOOTPRINTS PRESCHOOL

2015-16 Registration Form

Child's name _____

Address _____

City/State/Zip _____

Date of birth _____ Age _____

Mother's Name _____

Primary Telephone number _____

Secondary telephone number _____

Email Address _____

Mother's occupation (optional) _____

Father's name _____

Father's primary number _____

Father's occupation (optional) _____

****NOTICE****

In order for Footprints preschool to reserve a space for your child(ren) for the fall 2015-16 enrollment, please complete this form and return it, along with a **non-refundable** registration fee of **\$100.00 per family**.

****PLEASE CIRCLE ONE OF THE FOLLOWING OPTIONS REGARDING THE CLASS YOU WISH TO ENROLL YOUR CHILD****

2015-2016 Tuition Rates

Days per Week

3 Days/Week

*4 Days/Week

5 Days/Week

2-4 Year Olds

\$200 per month

\$260 per month

\$320 per month

Pre K

\$215 per month

\$275 per month

\$335 per month

* For 4 Days/Week, please circle one: M,T,W,F or M,W,Th,F

* There is a \$20/month sibling discount for families enrolling 2 or more children

Supply Fee

\$150.00 per child, per year (due in September)

Registration Fee

\$100.00 per family, per school year

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FOR OFFICE USE ONLY

Date _____

Amount Paid _____

Check # _____

Teacher _____