

Christ Church Preschool Registration Form 2020-2021

For Office Use Only:
Attnd___ SB___
Rostr___ Outlk___

Child's Name _____ Date of birth ___/___/___
 Name Called _____ Male ___ Female ___
 Address _____ Age as of 9/1/20 _____
 City _____ Zip Code _____ Email _____
 Mom's Name _____ Dad's Name _____
 Home Phone# _____ Dad's Wk# _____
 Mom's Cell# _____ Dad's Cell# _____
Please circle one: New Family Legacy Family Current Family

Enrollment Fees (non-refundable)

Infants & Toddlers \$285	Preschoolers \$300
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Is Parent or legal guardian a registered member of Christ Church United Methodist?
 No ___ Yes ___ (CCUM Members receive a \$50 discount on enrollment fees.)

Toddler Schedule/Fees

Infants Birthdate: 9/2/19-2/29/20	Young Toddlers Birthdates: 3/1/19 - 8/31/19	Older Toddlers Birthdates: 9/1/18 - 2/28/19
T/Th ___\$385/month	T/Th ___\$315/month	M/W ___\$315/month
		M/W/F ___\$380/month

Preschoolers Schedule/Fees

My child will turn 2 By 9/1/20	My child will turn 3 By 9/1/20	My child will turn 4 By 9/1/20
___ T/Th \$315/month	___ M/W/F \$405/month	___ M-Th \$460/month
___ M/W/F \$380/month	___ T/Th/F \$405/month	___ M-F \$505/month
	___ M-Th \$435/month	
	___ M-F \$465/month	

Transition Schedule/Fees My child will turn 5 by 9/1/20

Transition ___ M-F \$545/month

Mark your first schedule choice in the box. Please indicate your 2nd and 3rd schedule choices below.
 2nd choice _____ 3rd choice _____

Please make checks payable to CCP

Enrollment fee \$ _____	Tuition fee \$ _____	Total Paid \$ _____
Ck# _____	Ck# _____	

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