



REGISTRATION FORM 2018- 2019

Child's Last Name _____ First Name _____
Date of Birth _____ Sex M F
Street Address _____
City _____ State _____ Zip Code _____
Home Phone _____ Email _____
Mother's Name _____
Mother's Cell _____ Work Phone _____
Father's Name _____
Father's Cell _____ Work Phone _____

Please indicate your Program Selection

PRESCHOOL TIME 8:00am-1:00pm 8:00am-3:00pm 3 Days 5 Days
 PRE-KINDERGARTEN TIME 8:00am-1:00pm 8:00am-3:00pm
 KINDERGARTEN TIME 8:00am-3:00pm
 GRADE 1 TIME 8:00am-3:00pm
 GRADE 2 TIME 8:00am-3:00pm
 GRADE 3 TIME 8:00am-3:30pm
 GRADE 4 TIME 8:00am-3:30pm
 GRADE 5 TIME 8:00am-4:00pm
 GRADE 6 TIME 8:00am-4:00pm
 GRADE 7 TIME 8:00am-4:00pm
 GRADE 8 TIME 8:00am-4:00pm
 CHP Transportation (please fill out transportation form)
 Before Care 2 Days 3 Days 5 Days
 After Care 2 Days 3 Days 5 Days

\$ 100.00 Registration Fee (for new students) and \$600.00 deposit with enrollment forms due by April 7, 2018. April 30th is the last day to refund the deposit. All other fees (Book fee, Professional Development fee) due by July 1st, 2018. Please submit with this form:
1.) Copy of the student's birth certificate. 2.) Student's latest physical examination form and immunization records:

* For Tuition rates please check the Tuition Schedule
The Registration Fee is non-refundable and non-transferable to siblings and cannot be substituted for other fees. Please refer to Parent Handbook for Tuition payment schedule. A sibling discount is offered on the lowest tuition. Parents who choose not to purchase the Tuition Insurance are required to sign the Tuition Waiver Form to verify personal intent to fulfill tuition obligations.

Signature of Parent or Guardian _____ Date _____