

CHILD'S NAME: _____ CHILD'S BIRTHDATE: _____

PRESCHOOL (Must be at least 3-years of age by August 31st)

Please check your desired schedule:	Regular School Hours	PM Extended Care (3:00pm-5:30pm)
(5) Five Full Days (8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>
(5) Five Half Days (8:00am - 12:00pm)	<input type="checkbox"/>	
(3) Three Full Days (Mon/Wed/Fri 8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>
(3) Three Half Days (Mon/Wed/Fri 8:00am - 12:00pm)	<input type="checkbox"/>	
(2) Two Full Days (Tues/Thurs 8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>
(2) Two Half Days (Tues/Thurs 8:00am - 12:00pm)	<input type="checkbox"/>	

PROJECT TRANSITION (Must be at least 4-years of age by August 31st)

Please check your desired schedule:	Regular School Hours	PM Extended Care (3:00pm-5:30pm)
Full Time (8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>
Half Day (8:00am - 12pm)	<input type="checkbox"/>	

KINDERGARTEN (Must be at least 5-years of age by August 31st)

Please check your desired schedule:	Regular School Hours	PM Extended Care (3:00pm-5:30pm)
Full Time (8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>

GRADE ONE

Please check your desired schedule:	Regular School Hours	PM Extended Care (3:00pm-5:30pm)
Full Time (8:00am - 3:00pm)	<input type="checkbox"/>	<input type="checkbox"/>

REGISTRATION

Date:	
Parent/Guardian Name:	
Mailing Address:	
Phone Number:	
Email Address:	
Parent/Guardian Name:	
Phone Number:	
Email Address:	
Signature:	
Registration Fee:	Please submit your \$250 registration fee electronically with link provided via email.