

INDICATE CHILD T-SHIRT SIZE
CIRCLE ONE)

Small - 2/4 Medium - 4/6

REGISTRATION APPLICATION 2011-2012 SCHOOL YEAR

OFFICE USE ONLY:

WL# _____ # _____

LA CASA DE CRISTO CHRISTIAN PRESCHOOL
6300 E. BELL RD, SCOTTSDALE, AZ 85254
(Please print clearly)

REGISTRATION APPLICATION DATE _____ TIME _____

CHILD'S NAME _____ SEX _____ BIRTHDATE _____
(FIRST) (LAST)

HOME ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ CELL _____ E-MAIL _____

FATHER'S NAME _____ MOTHER'S NAME _____

EMPLOYER _____ EMPLOYER _____

BUSINESS PHONE _____ BUSINESS PHONE _____

CLASS OPTIONS (CHECK FIRST OPTION)

_____	MINI 3'S	T/TH	AM	3 YR OLD CLASS	(3 BY DEC. 31)
_____	2D3'S	T/TH	AM	3 YR OLD CLASS	(3 BY SEPT. 1)
_____	2D3'S	T/TH	PM	3 YR OLD CLASS	(3 BY SEPT. 1)
_____	MINI 4'S	MWF	AM	4 YR OLD CLASS	(4 BY DEC. 31)
_____	MINI 4'S	MWF	PM	4 YR OLD CLASS	(4 BY DEC. 31)
_____	3D4'S	MWF	AM	4 YR OLD CLASS	(4 BY SEPT. 1)
_____	3D4'S	MWF	PM	4 YR OLD CLASS	(4 BY SEPT. 1)
_____	4D4'S	M-TH	AM	4 YR OLD CLASS	(4 BY SEPT. 1)
_____	4D4'S	M-TH	PM	4 YR OLD CLASS	(4 BY SEPT. 1)
_____	4D5'S	M-TH	AM	5 YR OLD CLASS	(5 BY DEC. 31)
_____	4D5'S	M-TH	PM	5 YR OLD CLASS	(5 BY DEC. 31)

WRITE IN SECOND CLASS OPTION _____

(Should your first class option become filled, you will automatically be placed in your second option if available, and be put on the wait list for your first option. In the event enrollment is not sufficient, we reserve the right to close and not offer certain sections.)

I INTEND FOR MY CHILD TO ATTEND FOR THE ENTIRE SCHOOL YEAR AND UNDERSTAND THAT I NEED TO GIVE ONE MONTH'S NOTICE OF WITHDRAWAL AND SIGN A WITHDRAWAL FORM.

SIGNATURE OF GUARDIAN REGISTERING _____

WOULD YOU LIKE TO RECEIVE INFORMATION REGARDING: CHURCH MEMBERSHIP SUNDAY SCHOOL MOPS

OFFICE USE ONLY

NONREFUNDABLE PROCESSING FEE _____ DATE _____

NONREFUNDABLE REGISTRATION FEE _____ DATE _____

CHURCH _____ CURRENT _____ SIBLING _____ PAST _____ COMMUNITY _____

REGISTRATION PACKET SENT _____