

A non-refundable \$75 registration fee must accompany this card before processing the enrollment. You will receive a letter confirming your child's placement within several weeks of the receipt of this registration.

Emergency Contact: _____ Relationship: _____ Phone #: _____
E-mail Address(es): _____
Mother's Name: _____ Occupation: _____ Work Phone #: _____
Father's Name: _____ Occupation: _____ Work Phone #: _____
Home Phone #: _____ Cell Phone #(s): _____
Home Address: _____



*** Please note: Your child must have turned the appropriate age for the class enrolled by 08/31/2010.**

Please provide the following information:

Student's current age: _____ Birth Date: _____
Month/Day/Year

- ___ 3-year-olds, Tuesday, Thursday
- ___ 3-year-olds, Monday, Wednesday, Friday
- ___ 2-year-olds, Tuesday, Friday
- ___ 2-year-olds, Monday, Wednesday
- ___ Pre-K, Monday — Friday
- ___ Pre-K, Monday, Wednesday, Friday

Please select the program you would like your child to attend:

Name: Last _____ First _____ Middle _____ Nickname _____

I hereby apply for the enrollment of my child for the 2010-2011 school year:

Brandywine Valley Christian Preschool Enrollment Card

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Please provide the following information:

Student's current age: _____ Birth Date: _____
Month/Day/Year

Home Address: _____

Home Phone #: _____ Cell Phone #(s): _____

Father's Name: _____ Occupation: _____ Work Phone #: _____

Mother's Name: _____ Occupation: _____ Work Phone #: _____

E-mail Address(es): _____

Emergency Contact: _____ Relationship: _____ Phone #: _____



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