

# Sunbeams 2010-2011 Registration Form

FBC Sunbeams Dayschool 481 Hood Center Drive Rock Hill, SC 29730

Child's Name \_\_\_\_\_ M/F Name called \_\_\_\_\_

Parent's Name \_\_\_\_\_ Home phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Child's Birth Date \_\_\_\_\_ E-mail address \_\_\_\_\_

Church you Attend \_\_\_\_\_ Previous school attended \_\_\_\_\_

## Emergency Information

Mother's Work Number/Cell \_\_\_\_\_ Father's Work Number / Cell \_\_\_\_\_

Name of emergency contact \_\_\_\_\_ Phone number \_\_\_\_\_

Child's Doctor \_\_\_\_\_ Phone Number \_\_\_\_\_

Any allergies your child has: \_\_\_\_\_ Names of those authorized to pick up your child: \_\_\_\_\_

Select attendance choice and write in the blank provided:

### Beginners(15 months by Sept. 1, 2010)

2 days/week \_\_\_\_\_ (M, Tu, W, Th)

3 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

4 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

5 days/week \_\_\_\_\_

### Two Years Old (2 years old by Sept. 1, 2010)

2 days/week \_\_\_\_\_ (M, Tu, W, Th)

3 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

4 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

5 days/week \_\_\_\_\_

### Three Years Old (3 years old by Sept. 1, 2010)

2 days/week \_\_\_\_\_ (M, Tu, W, Th)

3 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

4 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

5 days/week \_\_\_\_\_

### Four Years Old (4 years old by Sept. 1, 2010)

2 days/week \_\_\_\_\_ (M, Tu, W, Th)

3 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

4 days/week \_\_\_\_\_ (M, Tu, W, Th, F)

5 days/week \_\_\_\_\_

Mother's Morning Out-Fridays only \$12/day \_\_\_\_\_

### Due at time of application:

Registration fee-\$55

Materials Fee-2-3 days-\$20 3-4 days-\$30

Checks payable to FBC Sunbeams

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Registration Fee \_\_\_\_\_ Date \_\_\_\_\_ Check No. \_\_\_\_\_

Materials Fee \_\_\_\_\_ Date \_\_\_\_\_ Check No. \_\_\_\_\_

