



Ascension

Preschool Registration Form

Three-year-old Preschool

To enroll your child in the Ascension preschool program, complete this form and return along with the non-refundable registration fee.

Childs Full Name

Birth Date

Religion/ Parish Membership

Male () OR Female ()

Father's Name

Mother's Name

Address ZIP

Address ZIP

Home Phone Cell Phone

Home Phone Cell Phone

email Address

email Address

Attendance: ____ **Full Time** ____ **3 days/week** ____ **Mornings only**

REGISTRATION FEE: \$150.00 PER CHILD (NONREFUNDABLE)

Early Bird Discount Fee if paid by February 8th - \$100.00

***Please read and check the appropriate line:**

____ I am registering my child for Three's Preschool for the fall of 2019, please debit the account on file for the registration fee.

____ I am registering my child for Three's Preschool for the fall of 2019, I have attached a check for the registration fee.

PARENT SIGNATURE

Date

***Note: You will receive additional paperwork prior to the August Orientation Meeting to complete & return.**

Office Use Only: Amount Paid _____

Date Paid _____

Check/Batch # _____