



## Cumming Baptist Preschool Registration Form 3-K Class

Thank you so much for your interest in our preschool! We look forward to the opportunity to work with you and your child! Please fill out the information below if you would like to register your child for the **2018-19** school year.

Child's Full Name \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Class: (circle one) 3 day 4 day

Parent's Names \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

I would like to enroll my child/children for the **2018-19** school year. I am enclosing the non-refundable **\$115** registration fee. The non-refundable activity fee of **\$50** is due by **May 1**. I understand my child will be signed up for either a 3 day or 4 day preschool program that will be in session from 9-12:30 each week. The tuition per month will be **\$200 (3 day)** and **\$220 (4 day)**, payable the month prior. For example, September tuition will be paid on August 1. CBC Preschool will begin August 27. We will follow the Forsyth County school calendar for all breaks, holidays and inclement weather days.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_