

# CHRIST THE GOOD SHEPHERD PRESCHOOL

## SUMMER SESSION ENROLLMENT FORM

**Please note: Parents/Guardians are financially responsible for all weeks.**

Your registration form must be accompanied by non-refundable registration fee of \$50 per child.

Please return this form as soon as possible to ensure a place in our Summer Session.

1) Child's Name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ #Days Attending \_\_\_\_\_ Days Attending: M, T, W, Th, F ( Half Day / Full Day )

Any Known Allergies: \_\_\_\_\_

2) Child's Name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ #Days Attending \_\_\_\_\_ Days Attending: M, T, W, Th, F ( Half Day / Full Day )

Any Known Allergies: \_\_\_\_\_

3) Child's Name: \_\_\_\_\_

Date of Birth \_\_\_\_\_ #Days Attending \_\_\_\_\_ Days Attending: M, T, W, Th, F ( Half Day / Full Day )

Any Known Allergies: \_\_\_\_\_

Mother's Name:	Father's Name:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell#:	Cell#:
E-Mail:	E-Mail:
Home Address:	Home Address:

Doctors Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Any custodial concerns of which we should be aware: \_\_\_\_\_  
(Please provide documentation.)

**In Case of Emergency Contact** (list contacts that can be called in addition to the numbers above)

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

### Tuition Rate Per Child

2 Full Days: \$96	2 Half Days: \$70
3 Full Days: \$129	3 Half Days: \$99
4 Full Days: \$164	4 Half Days: 126
5 Full Days: 193	5 Half Days: \$140

Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

Office Use: # of Student \_\_\_\_\_ X \$50.00 equals Total Reg. fee of \$ \_\_\_\_\_