

# Celebration Academy Enrollment Form

Child's Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Male/Female

Child's Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Male/Female  
(Please underline the name by which your child is to be called)

Mailing Address \_\_\_\_\_ Subdivision \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_ Work # \_\_\_\_\_

Cell # \_\_\_\_\_ Email \_\_\_\_\_

Father's Address (if different from above) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_ Work # \_\_\_\_\_

Cell # \_\_\_\_\_ Email \_\_\_\_\_

Mother's Address (if different from above) \_\_\_\_\_

Current Marital Status: (Circle One) Married Separated Divorced Widowed

Child Lives with: \_\_\_ Mother and Father \_\_\_ Mother \_\_\_ Father \_\_\_ Other \_\_\_\_\_

Which church do you currently attend? \_\_\_\_\_

How old will your child be on September 1<sup>st</sup> \_\_\_\_\_

Please indicate the class schedule of your choice by 1 for first choice and 2 for second choice.

## **One Year Olds (Must be 1 by June 1<sup>st</sup>)**

\_\_\_ **Monday/Wednesday** \_\_\_ **Tuesday/Thursday**

Monthly tuition for 2 days per week: \$155      Registration Fee: \$155

## **Two Year Olds (Must be 2 by September 1<sup>st</sup>)**

\_\_\_ **Monday/Wednesday** \_\_\_ **Tuesday/Thursday** \_\_\_ **Add Friday**

Monthly tuition for 2 days per week: \$155      Registration Fee: \$155

Monthly tuition for 3 days per week: \$175      Registration Fee: \$175

## **Three Year Olds (Must be 3 by September 1<sup>st</sup>)**

\_\_\_ **Monday/Wednesday** \_\_\_ **Tuesday/Thursday** \_\_\_ **Add Friday**

\_\_\_ **Tuesday/Wednesday/Thursday** \_\_\_ **Add Monday** \_\_\_ **Add Friday**

Monthly tuition for 2 days per week: \$155      Registration Fee: \$155

Monthly tuition for 3 days per week: \$175      Registration Fee: \$175

Monthly tuition for 4 days per week: \$215      Registration Fee: \$215

## **Four Year Olds (Must be 4 by September 1<sup>st</sup>)**

\_\_\_ **Monday - Thursday** \_\_\_ **Monday - Friday**

Monthly tuition for 4 days per week: \$215      Registration Fee: \$215

Monthly tuition for 5 days per week: \$240      Registration Fee: \$240

## **Kindergarten (Must be 5 by September 1<sup>st</sup>)** \_\_\_ **Monday-Friday**

Monthly tuition is \$275 per month for 12 months/first payment is due June 1. All Fees are nonrefundable/nontransferable.

Registration fee is \$275 fee

Please charge my credit card for the registration fee \_\_\_\_\_

Any known food allergies \_\_\_\_\_

Has your child attended day care or other preschool? \_\_\_\_\_

Day Care/Preschool \_\_\_\_\_ Length of time \_\_\_\_\_

### Waiver of Liability

Should my child become ill or injured during the time he or she is in the care of Celebration Academy, I understand the school's policy will be as follows:

1. The school shall attempt to contact me.
2. In event the school is unable to contact me, the school shall attempt to contact the persons listed on the clinic card.
3. Should this fail, the school shall be authorized to secure such medical attention and care for my child as deemed necessary.

I also give permission for my child to take part in all activities at Celebration Academy, and will not hold Celebration or its employees or its volunteers liable to me or my child because of any injury to my child at school or during any school activity.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Doctor/Pediatrician \_\_\_\_\_ Phone # \_\_\_\_\_

Medical Facility Preferred \_\_\_\_\_

\*\*\*\*\*IT IS THE RESPONSIBILITY OF THE PARENT TO INFORM US OF ANY CUSTODY ISSUES THAT MIGHT CONCERN THE PRESCHOOL AND/OR YOUR CHILD.\*\*\*\*\*

Siblings' names:

Birthday

School:

- 1.
- 2.
- 3.

Office information: Registration Fee: \_\_\_\_/\_\_\_\_/\_\_\_\_ Processed (Initial) \_\_\_\_/\_\_\_\_