

Christ the King Preschool

Registration and Authorization Form

Please fill out the information sheets and attach \$45.00
Registration Fee (payable to CTK Preschool) and return to the
Preschool.

_____TTH morning class

_____MWF morning class

Child's name _____ Male or Female

Child's nickname _____ Date of Birth _____

Child's address _____

City, Zip _____

Home phone _____ e-mail _____

How did you hear about the preschool? _____

Parent/Guardian

1) Name _____ Relationship _____

Address _____ Phone _____

Work phone _____ Cell phone _____

2) Name _____ Relationship _____

Address _____ Phone _____

Work phone _____ Cell phone _____

Child resides with _____

If parent cannot be reached, contact person:

1) Name _____ Relationship _____

Phone _____

2) Name _____ Relationship _____

Phone _____

Child's Doctor _____ Phone _____

List other children and ages in the family_____

Church affiliation?_____

Any allergies or health concerns, please describe_____

Please give any information concerning your child that would be helpful (fears, likes, dislikes, previous group experiences)_____

What would you like your child to gain from his/her preschool experience?_____

In the event of an emergency, I authorize CTK Preschool to provide first aid to my child. Yes___ No___

Our tuition is pro-rated over a period of nine and one-half months, with one half tuition due in June. This is the total cost of the program, regardless of vacations, holidays, snow days, or the first/last days of school

- TTH Class: 3-4 yr. olds, 8:30- 11:30 am \$155/month
- MWF Class: 4-5 yr. olds, 8:30 - 11:30 am \$200/month
- Optional Lunch Bunch M-Th: 11:30 am- 12:30 pm \$6/day

Signed_____ Date_____