New Perth Preschool Registration 2024-2025

704-528-5565* newperthpreschool@gmail T-Shirt Size _____

Student's Full Name			Name Student Goes By		
Age (as of Aug 31, 2024)	Date of Birth	Sex	_ Home Phone		
Mother's Name		Cell Phon	e		
Mother's Employer		Work Pho	_ Work Phone		
Father's Name		Cell Phon	_Cell Phone		
Father's Employer		Work Pho	one		
Mailing Address	City		Zip		
Email	v	Who does child reside with			
Eligibility will be based on the NC I age as of August 31 st , 2024 and w		st 31 st . Please c	ircle the correct class for your child's		

	4-day \$200	olds 3-day \$175 (Mon,Tues,Wed,Thurs)		2 year olds 3-day \$175 Tues,Wed,Thu			
Payment Method – Circle One ACH Debit/Credit (Service Fee Added) Cash Check *Additional children in the same family receive a \$10 discount on monthly tuition.							
Does your child have any special physical or emotional needs?							
Does your child have any known allergies? If so, please list							
Does New Perth Preschool have your permission to use photographs and/or videos of your child on the website and social networks for advertisement purposes?							
Parent Signature				_ Date			
*A registration fee is required to be submitted with this form. The <u>registration fee for all classes is \$85</u>							

per child or \$125 per family. This is a non-refundable deposit that will guarantee your child's spot in our program. The registration fee includes a t-shirt and accidental insurance policy for each child.