



# HOPE

Christian Preschool  
Registration Form

## Child Information

Child's Name	M / F	Date of Birth	Nickname (if any)
Address			
City/State/Zip		Home Phone	

## Parent/Guardian Information

Parent/Guardian Name		Parent/Guardian Name	
Street Address		Street Address	
City/State/Zip		City/State/Zip	
Home Phone	Cell Phone	Home Phone	Cell Phone
Email Address		Email Address	

I want my child to attend:	Current Rates (effective August 2017)	
	Monday, Wednesday, Friday 8:30 - 11:30	\$165/month
	Monday, Wednesday, Friday Early Drop Off 8:00 - 8:30	\$30/month
	Wednesday Extended Day (for children entering Kindergarten next year) 11:30 - 2:30	\$62/month
	Tuesday, Thursday 8:30 - 11:30	\$135/month
	Tuesday, Thursday Early Drop Off 8:00 - 8:30	\$25/month

**\$25 registration fee must accompany form.  
Make checks payable to: Hope Lutheran Church**

<b>For Office Use Only:</b> <input type="checkbox"/> Enrollment Paperwork Sent <input type="checkbox"/> Enrollment Paperwork Returned <input type="checkbox"/> ProCare <input type="checkbox"/> Tuition Express <input type="checkbox"/> Security System
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