

REGISTRATION FORM FOR FIRST PRESBYTERIAN CHURCH NURSERY SCHOOL 2025-2026

(\$55 non-refundable fee must accompany this form)

Partial Scholarships are available-please request a form upon registration

PLEASE PRINT:

Child's Name	d's Name Prefers to be called			Sex
Date of Birth	Address			
EMAIL (mom) (Dad)				
Mother's Name		Phone		
Address (if different)_				
Father's Name		Phone		
Address (if different)_				
	to attend, your child must be th or four years old on or bef ARK YOUR 1 ST AND 2 ND CHOICES:	fore August 1 for the 4 y	rear old classes.	
	ds: 1. TWO DAY CLASS	9-11:30 a.m. T, Th	(Mat's Fee-\$55)	\$150/mo
OR:	2 THREE DAY CLASS	9-11:30 a.m. M,W,F	(Mat's Fee-\$65)	\$165/mo
Classes for 4/5 year old	s: 1 AM 3 DAY CLASS	9:30-12 p.m. M,W,F	(Mat's Fee-\$65)	\$165/mo
4 TH day o	option (part of AM 3 day class) (dependent upon enrollment)	9:30-12 p.m. T	(Mat's Fee-\$65)	\$185/mo
OR:	2PM 3 DAY CLASS	12:30-3 P.M. M,W,F	(Mat's Fee-\$65)	\$165/mo
OR:	(dependent upon enrollment) 3 5 DAY CLASS	9-11:30 a.m M-F	(Mat's Fee-\$70)	\$200/mo
	***PRE-SESSION CHILD CARE is	available from 8:00-9:3	0 a.m. @\$10.00/day	
I wish to en	roll my child in pre-session care	:YesNo Days	:: M T W TH F Time:	
	CHECK	ALL THAT APPLY:		
FP	C Church Member Currently	Attending (this child)	Previously Attended	
(name)	I give my pe	ermission for my name o	and my child's name to d	appear on the
	(Class Roster.		
I DO No	OT give my permission for my na	ame and my child's name	e to appear on the Class	Roster.
	Signature of ALL parents/gu	uardians to be listed on	the class roster	
				Date