

2021-2022 First School Preschool Enrollment Form

Child's Name:_____

DOB_____age_____male_____female_____

Mother's name_____

Cell#_____work #_____

Father's name_____

Cell#_____work#_____

Home address_____

City/Zip _____

Home phone#_____

Church that you attend_____

I would like to register for:

MMO (ages 12 -24 months) T___ W___ Th___

2s and 3s Two Day program _____

2s and 3s Three Day program _____

4s PreK Four Day program _____

KT 4s Five Day program _____

*children must be the age of the class they are enrolled in on or before August 31st.