

**Central Baptist Church of Bearden
Preschool Weekday 2008-2009
Registration Form**

Children are a gift from the Lord!

Child's Name: _____

RETURNING PSWD STUDENT? YES _____ NO _____

Circle one: Male Female Date of birth: _____

Is child potty trained? _____ yes _____ no

Address: _____

_____ IF CURRENT PSWD STUDENT, PLEASE CHECK IF THIS IS A
CHANGE OF ADDRESS OR PHONE NUMBER

Father's name: _____
E-mail address: _____

Mother's name: _____
E-mail address: _____

Home phone #: _____ Cell phone #: _____

Are you a member of Central Baptist Church of Bearden? _____

Days requesting: ___ Monday ___ Tuesday ___ Wednesday ___ Thursday

Please note:
Registration fee is due at time of registration to hold spot in class and is
non-refundable. \$100 for first child; \$75 for second child; \$50 for third child.

OFFICE USE ONLY

Class assignment: WD _____

Days attending: ___ Monday ___ Tuesday ___ Wednesday ___ Thursday

Amount paid _____ Cash _____ Receipt # _____ Check # _____