



Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Address: \_\_\_\_\_

Father: \_\_\_\_\_  
Email: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Mother: \_\_\_\_\_  
Email: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Class:	Days:	Hours:
<input type="checkbox"/> Lambs (18mo-2years, Young Preschool)	<input type="checkbox"/> Monday-Friday	<input type="checkbox"/> 9:00-12:30
<input type="checkbox"/> Foxes (2-3years, Young Preschool)	<input type="checkbox"/> M, W, F	<input type="checkbox"/> 9:00-5:30
<input type="checkbox"/> Koalas (3-4years, Preschool)	<input type="checkbox"/> Tu, Th (Lambs, Foxes, and Koalas only)	
<input type="checkbox"/> Monkeys (4-5years, Pre-K)		

### Early Care Hours:

7:00-9:00  
 8:00-9:00

### Indicate your registration fee. This will secure your child's spot:

\$100—Returning Family       \$130—New Family

By signing below I am stating that my child will attend Coastline Bible Preschool. I also agree to give written 30 day notice should circumstances arise that would prevent my child from attending as agreed. In the event that my child does not attend Coastline Bible Preschool and I fail to give written notice I understand that I will be charged full tuition whether my child attends or not.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

How did you hear about our school?:  
Returning Family \_\_\_\_\_ Friend \_\_\_\_\_ Website \_\_\_\_\_ Other: \_\_\_\_\_  
Are you affiliated with a church in our community?: \_\_\_\_\_ Which one?: \_\_\_\_\_

**FOR OFFICE USE ONLY:**  
Registration Paid by CASH \_\_\_\_\_ or CHECK \_\_\_\_\_ Date and Check # \_\_\_\_\_ Start date \_\_\_\_\_