



Registration

Registrations are accepted at any time and are placed in a waiting file until an opening becomes available. This registration does not ensure final enrollment. A non-refundable \$50 application fee must accompany this application. Handprints Christian Early Learning Center is open to any child regardless of race, color, or creed.

Date: _____ Child's Date of Birth: _____

Child's Name: _____
First Middle Last

Gender: _____ Nickname (name child wishes to use in school): _____

Address: _____

City: _____ Zip Code: _____ Home Phone: _____

Father's Name: _____
First Middle Last

Cell/Beeper: _____ Work Phone: _____

Mother's Name: _____
First Middle Last

Cell/Beeper: _____ Work Phone: _____

Admission Date Desired: _____

Please check the following program you are interested in enrolling your child:

- 3-year-old Traditional Pre-school (T TH 9:00 to 11:30)
- 4-year-old Traditional Pre-school (M W F 9:00 to 11:30)
- 4-year-old Traditional Pre-school (M W F 1:00 to 3:30)
- Pre-school Plus Summer Program (9:00 to 1:00)
- Full-day child care:

Mondays Time: _____ to _____

Tuesdays Time: _____ to _____

Wednesdays Time: _____ to _____

Thursdays Time: _____ to _____

Fridays Time: _____ to _____

Full-day children are placed in the class based on their current age. Traditional pre-school children are placed in the class based on their age as of December 1st. Children in the 3 and 4 year old full-day programs and traditional pre-school programs must be potty trained and no longer dependent on "pull-ups" before entering the program.

Describe any special physical, academic or behavioral needs: _____

Describe any allergies or special medical needs: _____

Is your child toilet trained? _____ If yes, does he/she need any special help while using the toilet? _____

Please write any other comments you would like to share regarding your child.

(Parent Signature)

(Date)

Please send completed registration form and \$50 non-refundable registration fee to:

Handprints Christian Early Learning Center
38100 Utica Road
Sterling Heights, MI 48312

We will contact you upon receipt of this information.

For Office Use Only

Registration received _____ Age _____

Classroom: Infant Walker Toddler 3-year-old 4-year-old

3-year-old Pre-school 4-year-old Pre-school (a.m.) 4-year-old Pre-school (p.m.) Pre-school Plus

Registration Fee

Accepted

Comments: