



# Registration Form

## Community Preschool

Please complete form to confirm your child's class selection. A **\$50 non-refundable registration fee** is due with completed registration form (\$25 Registration for second sibling).

Checks should be made payable to: Community Preschool, PO Box 495, Chesterland, Ohio 44026

Child's name \_\_\_\_\_ Birthday \_\_\_\_\_

Preferred name \_\_\_\_\_ Age on Sept. 1, 2024 \_\_\_\_\_ Male or Female  
(please circle one)

Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_

Home address/city/zip \_\_\_\_\_

Mom's Cell (\_\_\_\_\_) \_\_\_\_\_ Dad's Cell (\_\_\_\_\_) \_\_\_\_\_

E-mail (billing/communication): \_\_\_\_\_

Previous preschool experience: Y or N

If so, where? \_\_\_\_\_ Dates attended? \_\_\_\_\_

Is there a second language spoke in the home? If so what language: \_\_\_\_\_

How did you hear about Community Preschool? \_\_\_\_\_  
(Friend/Family, Chesterland News, Facebook, Instagram, Other)

Please indicate below which class you would like your child enrolled:

- |   |                   |                        |
|---|-------------------|------------------------|
| <input type="checkbox"/> 3-year-old morning   | Wed/Thurs/Fri     | 9:00 a.m. - 11:30 a.m. |
| <input type="checkbox"/> 3-year-old morning   | Thurs/Fri         | 9:00 a.m. - 11:30 a.m. |
| <input type="checkbox"/> 3-year-old afternoon | Tue/Wed/Thurs     | 12:00 p.m. - 2:30 p.m. |
| <input type="checkbox"/> 4-year-old morning   | Mon/Tue/Wed       | 8:30 a.m. - 11:30 a.m. |
| <input type="checkbox"/> 4-year-old morning   | Mon/Tue/Wed       | 8:30 a.m. - 12:30 p.m. |
| <input type="checkbox"/> 4-year-old afternoon | Mon/Tue/Wed/Thurs | 12:00 p.m. - 3:00 p.m. |
| <input type="checkbox"/> 5-year-old morning   | Mon/Tue/Wed/Thurs | 8:30 a.m. - 12:30 p.m. |

*This class is designed for students who have completed a four year old program or desire an additional year of preschool.*

Children enrolled in the preschool **must** be **toilet-trained**. All class times are subject to change due to class sizes or demand. You will be notified of any changes as soon as possible. The preschool director and/or board reserve the right to cancel any session that does not meet minimum class size requirement.

### Office Use Only

Check # \_\_\_\_\_ Cash Receipt # \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date Received: \_\_\_\_\_