



St. Paul's Preschool
 620 Romeo St.
 Rochester, MI 48307
 248.651.9361
 www.stpaulsrochester.org

Completed form and non-refundable registration fee of \$75 should be mailed to:
 St. Paul's Preschool
 P.O. Box 80307
 Rochester, MI 48308-0307

ENROLLMENT APPLICATION 2018-2019 SCHOOL YEAR

Child's Full Name: _____

Date of Birth: _____ Gender of Child: _____ Male _____ Female

Parents' Names _____

Home Phone: _____ Cell Phone: _____

Email: _____

Current address: _____

City: _____ State: _____ Zip Code: _____

Special Medical Concerns/Allergies _____
 (A Medical Action Plan will be included with your enrollment packet.)

Are you a member of St. Paul's United Methodist Church? _____

How did you learn about St. Paul's Preschool?
 Previously attended _____ Church Member _____ Friend Recommendation _____
 Website _____ Other (please list) _____

SESSIONS

____ 4 year-old Program (M-F 9 a.m.-12 p.m.)
 (Must be 4 by September 1)

____ 3 year-old Program (M,W,F 9 a.m.-12 p.m.)
 (Must be 3 by September 1)

____ Young 3's (T,Th 9 a.m.-12 p.m.)
 (Must be 3 by December 31)

REQUIREMENTS

- Children must be fully potty trained before the first day of class in order to be enrolled.
- A non-refundable registration fee of \$75 must be received in order to hold my child's place on the roster.

Signature: _____ Date: _____

Office Use Only: _____ Deposit Received _____ Date _____ Payment Method _____