



**Enrollment Form**  
**Part-time Pre-School Program**

Name of Child \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Email \_\_\_\_\_ Father's Email \_\_\_\_\_

Please Enroll My Child in the Following:

\*3 / 4 yrs. Part-time Preschool Class\*\*  
Tuesdays/Thursdays 9:00 AM — 12:00 PM \_\_\_\_\_

Is your child potty trained? Yes \_\_\_\_\_  
No \_\_\_\_\_

\*4 / 5 yrs. (PreK) Part-time Preschool AM Class\*\*  
Mon./Wed./Fri. 9:00 AM—12:00 PM \_\_\_\_\_

\*4 / 5 yrs. (PreK) Part-time Preschool PM Class\*\*  
Mon./Wed./Fri. 12:30—3:30 PM \_\_\_\_\_

**\*CUT-OFF BIRTHDAY FOR PART-TIME PRESCHOOL IS SEPTEMBER 30TH\***

**\*\*Please note that your child must be fully potty trained to enroll in these classes\*\***

Please enroll my child in The Gathering Place Polaris. The child care fees have been fully explained to me and I understand them. I will be financially responsible for all fees and tuition incurred. I also agree to follow all the rules set by the "Family Handbook." I understand that I will be charged according to the number of days that I am registered for. I understand that the enrollment fee check made payable to The Gathering Place Polaris is due at the time of enrollment. I understand that it is non-refundable should I decide not to attend the Center.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Enrollment Fee: \_\_\_\_\_

Materials Fee: \_\_\_\_\_

Check #: \_\_\_\_\_

Processed By: \_\_\_\_\_

**ENROLLMENT FEES**

IN ORDER FOR YOUR CHILD TO BE CONSIDERED FOR PRE-SCHOOL, COMPLETE THIS FORM AND SUBMIT TO THE ADMINISTRATIVE OFFICE ALONG WITH THE **ENROLLMENT FEE OF \$75 AND MATERIALS FEE OF \$40**. ONCE A CLASS ROSTER HAS BEEN FILLED, ADDITIONAL APPLICANTS WILL BE ADDED TO THE WAIT LIST, AND NOTIFIED IF A SPOT SHOULD COME AVAILABLE.

**~ ENROLLMENT FEE IS NON-REFUNDABLE ~**

