COMMUNITY UNITED METHODIST CHURCH PRESCHOOL

6652 Heil Avenue - Huntington Beach	, CA 92647-4359	714.842.1630	www.cumcpreschoolhb.com			
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PLEASE PRINT I	NFORMATION. BRING THIS	FORM ALONG WITH DEPOSIT TO	PRESCHOOL OFFICE.
Child's full name		Gender M F Birthda	ate
Name child is to be c	alled at school	Phone	
Dad's cell	M	om's cell	
E-mail address for re	ceiving preschool information		
Address		City	zip
Allergies			
Is there a custody or	der concerning this child? yes	no (circle)	
Mother/guardian/dom	nestic partner's full name		
Employer		Occupation	
Work address		Work phone	
Father/guardian/dom	estic partner's full name		
Employer		Occupation	
Work address		Work phone	
		45 to 11:45 a.m.	
	Mon/Wed/Fri	\$2650 per year or \$265 per mo	onth
	Tue/Thu	\$2250 per year or \$225 per mo	onth
	Mon/Tue/Wed/Thu/Fri	\$4250 per year or \$425 per mo	onth (PreK)*
	Mon/Wed/Fri	\$2650 per year or \$265 per mo	
	Tue/Wed/Thu	\$2650 per year or \$265 per mo	onth (PreK)*
	12	2:45 to 3:15 p.m. PreK*	
	Tue/Wed/Thu	\$2550 per year or \$255 per mo	onth
	Mon/Tue/Wed/Thu	\$2750 per year or \$275 per mo	onth
*PreK age requireme	ent is 5 years by September 20	16	
A non-refundable re enrolling at the same		6425 mo) by registering for a three a. rst child, \$100 for each additional chi stration.	
OFFICE USE ONLY			
registration	receipt		today's date
room assignment	teacher	1st year	
		2nd yea	r

session:	PreK 5 a.m.	MWF	TWTH	3 a.m	2 a.m	PreK 3 p.m.	4 p.m.