The Country Playhouse Preschool

Intent to Enroll

School Year Registering For:/				
Please fill out this form completely and bring hold your child's spot for the current or upcon spot in the class of your choosing. By fillir commitment to enroll your child at The Co credit/debit cards through automatic processifee, we will accept a check as payment. This formind at any time prior to the start of school, you choose to not enroll your child.	ming school ng out this ountry Playl ng each mo orm is NOT	year. This gu Intent to En house Presch onth for tuition a binding conf	arantees nroll forn ool. We n, howeve cract, and	your child will have a n, you are making a only accept ACH or er for the Registration you may change your
Child's Name:		Birth Date:_		Gender: M F
Address:				Zip Code:
Phone Number: () -		Preschool -4 Yr. Olds)		□ Pre-Kindergarten (Older 4-5 Yr. Olds)
Parent/Guardian Name:				
Phone Number: () -	Email:			
Parent/Guardian Name:				
Phone Number: () -	Email:			
How did you hear about us? □Internet □Newspaper □Social Media	□Word	d of Mouth	□Friend	l/Family □Flyer
Did a currently enrolled family refer you to our If yes, who?	school?	□YES This family \	vill receiv	□NO ve a \$50 referral credit
Parent/Guardian Signature:			Date:	
DO NOT WRITE BELOW THIS LINE				
Registration Fee Paid: \$	□ Check	#	□ C	redit/Debit

Received by: _____

Date Received: ____/___/