

# Four Seasons Preschool Registration

Child's Name:

Child's Birth Date:

(Children must be three by the first day of school and potty trained)

Address:

City:

Zip Code:

Phone: Home:

Work:

Cell:

E-mail:

Check the class time you are registering for:

M.W.F. a.m.

M. T.W.TH. p.m.

T.TH. a.m.

(8:30 – 11:00)  
PRE2014-R1

(12:15 - 2:45)  
PRE2014-R2

(8:30 – 11:00)  
PRE2014-R3

A \$100 non- refundable deposit is required to enroll your child

Please make checks payable to: Royal Oak Recreation

Payment Method

Visa#:

CVV2:

Mastercard#:

CVC2:

Cardholder Name:

Cardholder Address:

Expiration Date:

The City of Royal Oak assumes no responsibility for personal injuries or loss of property while using City or School facilities. It is recommended that anyone enrolled in an activity, or using one of our facilities in general, make provisions to provide adequate coverage within their own family insurance. By registering for Department of Recreation and Public Service programs, registrants realize the inherent risks involved in the programs and appreciate the nature of the risks.

Signature of Parent or Guardian: