

Preregistration Form

Name of Child _____

Age of Child (on Sept. 1, 2021) _____ Birthdate _____

Address _____

Mother's Name _____ Cell _____

Father's Name _____ Cell _____

Home Phone _____

Email _____

Date _____

PMO Class 2-day class (Tuesday & Thursday)

2 & 3 Year Old Classes (select one):

3-day class Tuesday-Thursday _____

4-day class Monday-Thursday _____

4 Year Old Class 4-day class (Monday-Thursday)

Please submit this form with Registration Fee.

**Antioch Christian Church Preschool
3595 Sugar Pike Road
Canton, GA 30115
770-576-2583 antiohcanton.org**