Reading Baptist Day School 45 Woburn Street Reading, MA 01867

$\frac{Application\ for\ Enrollment}{3\ year\ old\ class}$

Child's Name	Primary Language
Date of Birth	Place of Birth
Address	
Pa	rents Information
Please circle pre	eferred phone number and email
Father	Mother
Address	Address
Home Tel. No	Home Tel. No
Business Tel. No	Business Tel. No
Occupation	Occupation
Cell #	Cell #
Email	Email
Others in Family/Relationship and age	e
Tu	Two Day Class resdays and Thursdays
Tuition: \$2600	9:00 – 12:00 0.00 per year (\$260.00 per month)
Please return the application form registration fee.	together with a \$75 per family, non-refundable
Signature_	Date