

**BRIGHT BEGINNINGS Weekday  
REGISTRATION FORM 2017-2018**

Child's Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Home Address \_\_\_\_\_  
Sex: M or F \_\_\_\_\_  
Home phone \_\_\_\_\_

Parents or Guardians:

Father's Name \_\_\_\_\_  
Home address if different \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Work phone \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Address if different \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Work phone \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell \_\_\_\_\_  
Others in the home and ages \_\_\_\_\_

List local persons who may be called in an emergency and parents cannot be located:

Name	Relationship	Telephone
_____	_____	_____
_____	_____	_____

Child's Physician \_\_\_\_\_ Telephone \_\_\_\_\_  
Allergies, if any: \_\_\_\_\_

Parent's Church Affiliation \_\_\_\_\_

Does the child attend Sunday school? \_\_\_\_\_ Where? \_\_\_\_\_

Has child attended a Weekday Program before? \_\_\_\_\_ Where? \_\_\_\_\_

**PLEASE CHECK THE CLASS FOR WHICH YOU ARE REGISTERING**

_____ Toddler	3 days a week (T, Th, F) \$ 145.00 per month
_____ Two Year	3 days a week (T, Th, F) \$ 145.00 per month
_____ Three Year	3 days a week (T, Th, F) \$ 145.00 per month
_____ Four Year	3 days a week (T, Th, F) \$ 155.00 per month
_____ Four Year	5 days a week (M-F) \$ 175.00 per month

REGISTRATION FEE OF \$90.00 IS DUE AT REGISTRATION along with a \$20 supply fee AND IS **NON-REFUNDABLE**. Please bring a **current** blue immunization form when you register your child. Tuition is due by the 10<sup>th</sup> of each month. (\$20 late fee)

**I agree to pay August 2017 and May 2018 tuition when school starts in August (two month's tuition).**

**Signature of Parent or Guardian:** \_\_\_\_\_