



Preschool Registration

Date: _____

Child's Name: _____ Your Location: _____

Address: _____

City/State/Zip: _____ Phone: _____

Birthdate: ____/____/____ School Attending: _____

Dad's Name: _____ Mobile #: _____

E-mail: _____ Birthdate: ____/____/____

Mom's Name: _____ Mobile #: _____

E-mail: _____ Birthdate: ____/____/____

Name of Church that Family Regularly attends: _____



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