



MOM'S DAY OUT

REGISTRATION FORM 2016 – 2017

FOR OFFICE USE ONLY

Age _____ DOB _____

Reg. Pd. _____ Ck# _____

Supply Pd. _____ Ck# _____

May Tuition Pd. _____ Ck# _____

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Email _____

Mother's Name _____

Employer _____ Cell Phone _____

Father's Name _____

Employer _____ Cell Phone _____

I agree to comply with the following policies of WEE Care Preschool & Kindergarten:

- The Registration Fee of \$55 must accompany this application. (No addition Registration Fee is due if already registered for preschool)
- The Supply Fee is \$65
- The Monthly Tuition is \$125
- All payments are non-refundable
- Checks should be made payable to WEE Care Preschool
- If your child is absent for illness or other reasons, it is your responsibility to continue to pay tuition unless he/she is formally withdrawn.
- You must notify the Director in writing 2 weeks in advance should you choose to withdrawal.
- Your child should be in good health and free of communicable diseases each day he/she participates. He/she must have all necessary immunizations.
- Three-year-olds should be toilet trained.
- The children will be taught Christian values and principles through Bible stories/verses at WEE Care Preschool & Kindergarten.

Signature of Father _____ Date _____

Signature of Mother _____ Date _____

W.E.E. Care Preschool & Kindergarten

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