## Fall Registration 2019 - 2020

PART-TIME ENROLLEES Two Days

## TO KNOW. TO GROW. TO SERVE.

## Lascassas Bap**t**ist Preschool

Today's Date:			DOB:						
Student's Name:				Age as of 8/1/19:					
Parents' N	Names:								
A	ddress:								
City:		ZIP:							
Home 1									
Mother'	Mother's Cell:		Father's Cell:						
Email A	Email Address:								
		N_REF	TINDAI	RLE RE	GISTRA	ATION	FFF D		
φισσ	<u>.00 110</u>	<u> </u>	UNDAL		GISTIM	AIION		<u>UE</u>	
	e are the tw SELECT	o-day option ONE:	member discons ns available a Monday	and they MUS	alculated after  ST be one of t	the following Tuesday/T	g combinatio Thursday		
Plo	ease <i>care</i>	<i>fully</i> circle	e the age a	ınd time o	ption you	need for y	our child	•	
	6:30 - 5:30	6:30 - 5:00 7:00 - 5:30	6:30 - 4:30 7:00 - 5:00 7:30 - 5:30	6:30 - 4:00 7:00 - 4:30 7:30 - 5:00 8:00 - 5:30	6:30 - 3:30 7:00 - 4:00 7:30 - 4:30 8:00 - 5:00	7:00 - 3:30 7:30 - 4:00 8:00 - 4:30	7:30 - 3:30 8:00 - 4:00	8:00 - 3:30	
Infants/Toddlers	\$360	\$350	\$340	\$330	\$320	\$310	\$300	\$290	
Twos	\$345	\$335	\$325	\$315	\$305	\$295	\$285	\$275	
Threes	\$340	\$330	\$320	\$310	\$300	<b>\$290</b>	\$280	\$270	
Fours	\$335	\$325	\$315	\$305	\$295	\$285	\$275	\$265	
Fives	\$330	\$320	\$310	\$300	\$290	\$280	\$270	\$260	
		$\mathbf{W}_{\mathbf{I}}$	rite down	your selec	tions belov	<b>V</b> .			
The time opt	tion we ne	ed is:		The r	nonthly tuit	ion due wil	l be:	<u> </u>	
Parent's Signature				Date					
Check #:	D	ate Paid: _							