



**REGISTRATION FORM  
2023-2024**

Child's Name: \_\_\_\_\_

Child prefers to be called: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

Siblings Name /Ages: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Primary Email: \_\_\_\_\_

.....

Parent Name: \_\_\_\_\_

Parent's Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Workplace and address: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent's Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Workplace and address: \_\_\_\_\_

**(PLEASE COMPLETE BACK OF REGISTRATION)**

Child's Name: \_\_\_\_\_

Any known allergies? \_\_\_\_\_

Special needs? \_\_\_\_\_

Additional services (i.e., speech) \_\_\_\_\_

.....  
\_\_\_\_ Friend \_\_\_\_\_

\_\_\_\_ Relative \_\_\_\_\_

\_\_\_\_ Newspaper \_\_\_\_\_

\_\_\_\_ Drive By \_\_\_\_\_

\_\_\_\_ Website \_\_\_\_\_

\_\_\_\_ Other \_\_\_\_\_

.....  
**Program Offerings for 2023-24 (Number by preference 1-2)**

**THREE/YOUNG FOURS PRESCHOOL PROGRAM:** *This preschool program is for children who are three years old or young four-year-olds and who **will NOT** be attending Kindergarten next year.*

3-Year-Old: T/Th	9:15 -11:45	\$170.00/month	_____
3-Year-Old: M/W/F	9:15 -11:45	\$215.00/month	_____

**PRE-K PROGRAM:** *This Pre-K program is for children who will be 4 years old by **September 1<sup>st</sup>**.*

Pre-K	M/W/F	9:15 -11:45	\$215.00/month	_____
*Pre-K	M-TH	9:15-12:45	\$336.00/month	_____

\*(Extended day)

**\$70.00 non-refundable registration fee is due at time of enrollment.** (Make checks out to God's Gifts Preschool)

Cash: \_\_\_\_\_ Check # \_\_\_\_\_

**\*\*Tuition will be paid in 9 monthly payments beginning Aug. 2023\*\***

Registration forms and payment can be dropped off or mailed to:

**God's Gifts Preschool 1976 Rt. 25**

**Oswego, IL 60543**