

BRIGHT BEGINNINGS CO-OP PRESCHOOL APPLICATION

Application Fee \$30.00

Monday, Wednesday, Friday: 9:15am-11:45am

Child's Name: _____ Birth Date: _____

Parents: _____

Address: _____

Phone: _____ Email: _____

Sibling: _____ Age: _____

Sibling: _____ Age: _____

Sibling: _____ Age: _____

Please return this form with the \$30.00 non-refundable application fee (please make checks payable to Bright Beginnings Preschool) to the Registrar or the Preschool on or before the deadline indicated on the cover letter. After the deadline, enrollment applications are considered on a first-come, first-served basis, based on the date the application fee is received.

Non-discrimination Policy: Bright Beginnings Preschool admits children of any race, creed, sex or nation origin. It does not discriminate on the basis of race, creed, sex or national origin or in the administration of the school or its educational policies.

I give Bright Beginnings Co-operative Preschool my permission to take my child on routine field trips around St. Mark's Church property.

I give Bright Beginnings Co-operative Preschool the right to make a roster to post and give to other parents. This roster will include my family's names, address, phone number and email addresses.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

For Registrar Use Only

Date received: __/__/__

Cash or Check# _____

Enrollment Packet Sent: __/__/__