



**The Preschool at  
Red Mountain United Methodist Church  
REGISTRATION FORM  
2010-2011**

2936 N. Power Rd., Mesa, AZ. 85215  
Tel: (480) 981-3833  
Website: www.redmtumcpreschool.org  
Email: info@RedMtUMCPreschool.org

<b>For Office Use Only</b>	
Date received _____	Fee received _____
Class assigned _____	Parent notified _____
Blue Emergency Card _____	Processed _____

Today's Date: \_\_\_\_\_  
 Previous Preschool Family: Yes  No  Yr Attended: \_\_\_\_\_  
 Red Mountain UMC member? Yes  No   
 How did you find us? Banner \_\_\_ Print Ad \_\_\_ Website \_\_\_  
 Friend \_\_\_ Preschool Family Ref. \_\_\_ Their name \_\_\_\_\_

**REGISTRATION FEE MUST ACCOMPANY APPLICATION**  
 First Child: \$ 75.00, Add'l Child: \$ 50.00 (fee is non-refundable)

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name To Be Used At School: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Employer: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Mother's Address \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 (if different from above) Email: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Employer: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Father's Address \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 (if different from above) Email: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

CLASS	BIRTHDAY BEFORE:	DAYS	TIME	10 MONTHLY PAYMENTS	PREFERENCE
3 year olds	9/1/10	T-Th a.m.	9:00 - 12:00	\$145.00	_____
		M-W-F a.m.	9:00 - 12:00	\$170.00	_____
		M - F a.m.	9:00 - 12:00	\$215.00	_____
4/5 year olds	9/1/10	M-W-F a.m.	9:00 - 12:00	\$170.00	_____
		M - F a.m.	9:00 - 12:00	\$210.00	_____

**If one parent is the sole legal guardian, or court orders are imposed, we are required to have a copy of documentation on file.**

Parent's Marital Status: Married  Divorced  Widow  Single  Special Circumstances \_\_\_\_\_

If your child is currently enrolled in The Preschool at Red Mountain UMC, please list the following: Class \_\_\_\_\_ Teacher \_\_\_\_\_

Was your child previously enrolled in a preschool? Yes  No  Where \_\_\_\_\_ Year \_\_\_\_\_

**I agree to assume all risks associated with my child's participation in this program:**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_