

Pleasant Hill PRESCHOOL

“A caring place for all God’s children”

2016-2017 Registration Form

Child’s Name:

(Last) (First) (Middle)

Child’s Date of Birth (MM/DD/YYYY):

Child’s Mailing Address:

(# and Street)

(City) (State) (ZIP)

Email Address (print)

Mother’s / Father’s Names:

Cell
Phone

Home Phone:

For which class are you registering your child? Please check:

_____ **2 Year-Old - Two Days**
(Tuesday & Thursday)

_____ **4 Year-Old - Three Days**
(Monday, Wednesday & Friday)

_____ **3 Year-Old - Two Days**
(Tuesday & Thursday)

_____ **4 Year-Old - Five Days: TK**
(Monday-Friday)

_____ **3 Year-Old - Three Days**
(Monday, Wednesday & Friday)

_____ **3 Year-Old - Five Days**
(Monday-Friday)

Enrollment Fee of \$125 is due at time of registration.
This annual fee is non-refundable.

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