

St. Matthew Lutheran Preschool

Pre-three's Program

10390 SW Canyon Rd. ~ Beaverton, OR 97005 ~ (503) 644-9148, ext 122

REGISTRATION FORM 2009-2010

Child's Last Name: _____ First Name: _____

Date of birth: _____ Age: _____ Potty trained? yes no

Home Address: _____ Zip _____

Home Phone # _____ Email: _____

Allergies/concerns? _____

Father's Name: _____ Cell phone: _____

Employer: _____ Phone: _____

Mother's Name: _____ Cell phone: _____

Employer: _____ Phone: _____

1st Emergency Contact: _____ Phone: _____

2nd Emergency Contact: _____ Phone: _____

Those authorized to pick-up your child: _____

Anyone NOT allowed to pick-up your child? _____

Class session time, dates & fees:

(child must be three by March 1, 2010)

September 2009 - May 2010

Every Thursday ~ 9:15-11:30 a.m. ~ \$45/month

**Note: this class has two teachers but also runs as a co-op.*

Each family will need to volunteer in the classroom a few times a year.

For office use only

Date: _____

\$50 reg. fee paid: _____

May '10 tuition paid: _____

Sibling: _____

Referral: _____

Scholarship: _____

Total Amt. Paid _____

Cash _____ Ck # _____

Rec'd by _____



PLEASE COMPLETE THE BACK OF THIS FORM