



Northwest Hills Preschool

A Ministry of Northwest Hills Church

9334 Fort Street, Omaha, NE 68134 / 402-572-8392

REGISTRATION FORM FOR 2017-2018 SCHOOL YEAR

1. Completion of this form and a \$25 nonrefundable registration fee will hold your child's place in the program.
2. Your first tuition payment is due by **September 5, 2017**.
3. You will receive a packet of enrollment forms to complete *prior* to the beginning of the 2017-2018 school year.

Please make your check payable to Northwest Hills Preschool Thank you.

Child's Full Name: _____

Date of Birth: _____ Sex: _____ Known Allergies: _____

Parent/Guardian Name: _____ Relationship to Child: _____

Phone: _____ Email: _____

Parent/Guardian Name: _____ Relationship to Child: _____

Phone: _____ Email: _____

Home Address: _____
Street and Number City, State, Zip

Please check the program your child is eligible for:

Mon/Wed/Fri Program (3 year olds)

Children must be 3 years old by 7/31/17

Monthly Tuition: \$100/mo.

Time: 9:00 am to 12:00 pm

Monday-Friday Program (4/5 year olds)

Children must be 4 years old by 7/31/17

Monthly Tuition \$150

Time: 9:00 am to 12:00 pm

What influenced your decision to enroll your child in our preschool?

Christian Teaching Location Referred by: _____ Other: _____

How did you hear about us? Referral Newspaper Ad Sign Phone Book Website Other:

Please read, sign, and date:

I understand that it is a Nebraska state law that all schools must maintain copies of their student's immunization records. I agree to provide Northwest Hills Preschool with a copy of my child(ren)'s immunization record. I understand that failure to comply within one month of my child entering preschool will result in my child's removal from the program, as required by the state.

Parent Signature: _____ Date: _____

Office Use: \$25 Fee Rec'd Cash or Check # _____ Date: _____