

FIRST PRESBYTERIAN CHURCH PRESCHOOL AND EXTENDED CARE

2344 Center St.
Bethlehem, Pa. 18017
610-867-2956

Pre-Registration Form

Name of Child _____

Date of Birth _____ Sex _____ Home Telephone _____

Address _____
(street) (city) (state) (zip code)

Parent's Name _____ email _____

Please mark your 1st and 2nd choices

_____ 2-day 2's AM (M/W)

_____ 1-day 2's AM (TH)

_____ 1-day 2's AM (F)

Note: Thursday and Friday can be either day or both days.

_____ 3-day young 3's AM (M/T/W)

_____ 2-day young 3's AM (Th/Fr)

_____ 3-day 3's AM (M/T/W)

_____ 2-day 3's AM (Th/Fr)

_____ 3-day 4's AM (M/T/W)

_____ 4-day 4's AM (M/T/Th/Fr)

_____ 5-day 4's AM (M – Fr)

Comments: _____

Complete the following ONLY if you wish to register your child for more than 15 hours per week of Extended Care. Not available for two year olds.

Please check **ONE** of the following:

_____ Part time extended care (16 – 25 hours/week)

_____ Full time extended care (more than 25 hours/week)

I need extended care for the following times: (Please list times, if possible)

Early morning (7:00 – 9:15 AM) Afternoon (11:45 AM – 6:00 PM)

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Total hours/week: _____

RETURN TO PRESCHOOL OFFICE BY FEBRUARY 8.