

**Acton Preschool Registration Form
2017-2018**

Student Name _____
First
Middle
Last

Name to be called at school _____

Date of Birth _____ Age on 08/31/17 _____ Sex: Male / Female

Student's mailing address _____

PRIMARY CONTACT INFORMATION

Name _____ Relationship _____

Phone numbers (Home) _____ (Cell) _____

Occupation/Place of Employment _____

Email _____

Facebook profile name _____
 (if you wish to be included in Acton's Facebook group)

SECONDARY CONTACT INFORMATION

Name _____ Relationship _____

Phone numbers (Home) _____ (Cell) _____

Occupation/Place of Employment _____

Email _____

Facebook profile name _____
 (if you wish to be included in Acton's Facebook group)

How did you hear about Acton Preschool? _____

Acton Preschool Registration Form

(Continued)

This registration is only valid for the 2017-2018 school year. A \$100.00 non-refundable registration fee is due at the time of registration to hold your child's space in the program. The student must be completely potty trained.

Wearing pull-ups is not allowed (for health and safety reasons no exceptions can or will be made to this requirement). Immunization records are required to be on file at the school. We will ask for them at the beginning of the school year. Tuition is \$210 per month and is due the first of each month starting in September and ending in May. (We are not able to deduct or prorate our fees.)

Date _____ Parent/Guardian Signature _____

Please mail this form, along with the registration fee, to:

Acton Preschool
171 Sand Hill School Road
Asheville, NC 28806

Please call us at [828-665-4302](tel:828-665-4302) or email us at actonumcpreschool@gmail.com with any questions that you may have. Email is the best way to reach us, especially during the summer.

OFFICE USE ONLY

Date Received _____

Check #/Cash _____

Confirmation email sent _____

Computer entry _____

