



ADVENTURE PLANET PRE SCHOOL REGISTRATION FORM

Child's Name: _____ Date of Birth: _____

Address: _____

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Expected Date of Entry: _____ Phone: _____

Circle Day: Monday Tuesday Wednesday Thursday Friday

Tuition Payment Will is: Every 4 weeks: _____ Weekly: _____

Half-time: _____ (8:30am-12:30pm) Full-time: _____ Half-time: _____ (2:00-6:00pm)

Registration Fee \$130.00 _____

Check Number: _____

How did you hear about us? (circle one) Web Page? Yellow Pages Friend

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