



2018-2019 YMCA Preschool Registration Form

Child's First Name: _____ Middle Name: _____ Last Name: _____

Birthdate: _____ Home Phone: _____

Home Address: _____

Mother's Name: _____

Mother's Work Phone: _____ Cell Number: _____

Mother's Email: _____

Father's Name: _____

Father's Work Phone: _____ Cell Number: _____

Father's Email: _____

Please check your preferences:

_____ **3 YEAR OLD/YOUNG 4 YEAR OLD**
Tues./Thurs. (2 day) morning, 8:30-11:00am @ \$85.00 per month

_____ **3 YEAR OLD/YOUNG 4 YEAR OLD**
Mon./Wed./Fri. (3 day) morning, 8:30-11:00am @ \$125.00 per month

_____ **3 YEAR OLD/YOUNG 4 YEAR OLD**
Mon. – Fri. (5 day) morning, 8:30-11:00am @ \$210.00 per month

_____ **4 AND 5 YEAR OLD**
Mon. – Fri. (5 day), 8:30-3:15pm @ \$150.00 per month

*4-5 year old prices are based on Voluntary Preschool State Funding and may be subject to change.

There is a \$35 non-refundable registration/transportation fee due at the time of registration.

Parent Signature: _____

Amount Paid: _____

Date Paid: _____

Receipt #: _____

Will you use YMCA Childcare? Childcare arrangements need to be made directly with Julie Rosacker to guarantee that there will be space available. Contact jrosacker@spencerymca.org or by calling 712-262-3782.