



Wee Grow Christian Preschool
8867 Kent St., Portland, MI 48875
Phone: 517-647-4473

2015-16 Registration Form 4-year-old Class

_____ Monday-Wednesday-Friday Class from 8:45-11:45 a.m. (\$110.00)

_____ I would be interested in an afternoon class, if it became available

Child's Name _____ Nick name _____

Date of Birth is _____ (Your child needs to be born before 12-1-2011)

Child's Address _____ City _____ Zip _____

Child's Phone Number _____

E-mail address if available _____ Gender: Male or Female

Is your child completely toilet trained and able to take care of their personal needs? Yes or No

Any comments that we may need to know _____

Any Food Allergies _____

Parent or Guardian Information

Father's Name _____ Cell Phone _____

Father's Employer _____ Work Phone _____

Mother's Name _____ Cell Phone _____

Mother's Employer _____ Work Phone _____

Does child live with both mother and father? _____

Family Information

Siblings Name and Date of Birth _____

Church in which you are an active member? _____

Please return this form with your \$50.00 non-refundable
registration fee to hold a spot for your child.

Office use-Paid registration with cash/check # _____ Registration# _____