

NEFFS UCC PRESCHOOL 5550 ROUTE 873, P.O. BOX 66 NEFFS, PA 18065 (610) 767-5327 preschool@unionucc.org

2017-2018 Registration

| Child's Name | | | | |
|-----------------------------------|------------|----------------|-----------------|----------------|
| Birthdate (Month/Date/Year) | | | Sex: M □ | F 🗆 |
| School District | | | | |
| Father's Name | | Occupation _ | | |
| Mother's Name | | Occupation _ | | |
| Mailing address | | | | |
| City | _ State | | Zip Code | |
| Phone Numbers: (Please put a * no | ext to you | r preferred co | ntact number fo | r class list.) |
| Home | _ | | | |
| Father's Cell | _ Fa | ther's Work _ | | |
| Mother's Cell | _ M | other's Work | | |
| Preferred email address | | | | |
| Secondary email if desired | | | | |

| My child is currently enrolled at Neffs UCC Preschool | | | No □ |
|--|---|-------------|----------------|
| My child is a sibling of a currently enrolled student | | | No □ |
| One of my children previously attended Neffs UCC Preschool | | | No □ |
| Referred By | | | |
| List areas where your chi | ld may need additional attention | | |
| PLEASE SELECT | T THE CLASS FOR WHICH YOU ARE | REGISTE | RING |
| ☐ 3 Year Old Class | Tuesday and Thursday \$125/month or \$1, 125/school ye | |)-11:30 AM |
| ☐ 4 Year Old Class | Monday, Wednesday, Friday \$150/month or \$1,350/school ye | | 0-11:30 AM |
| □ Pre-K Class | Monday- Thursday \$175/month or \$1,575/school ye | | 30-3:00 PM |
| | oplied for families with more than on me the younger child's tuition. | e child en | rolled. The |
| with this completed appli | FUND POLICY : A registration fee of s cation. Please make checks payable he registration fee is non-refundabl | to "Neffs l | |
| | provide T-shirts to new students. We eld trips to help us identify all childre | | • |
| Check one: ☐ Small (6-8) ☐ Medi | ium | UCC Pres | school T-shirt |
| Parent Signature | Date | | |