

**BRIGHT BEGINNINGS PRESCHOOL**  
**Student Registration Form 2015-2016**

After meeting with the Preschool Director, please complete the information below in order to secure space in one of our class offerings. Registration is open until all classes are filled. Upon completion of this form, please return it to the Director with a completed Family Requirements Form and applicable registration fee.

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**Class Preference:**

\_\_\_\_\_ Morning Glory Class (TuTh AM)

\_\_\_\_\_ Butterfly Class (MWF AM)

\_\_\_\_\_ Explorers Class (TuTh PM)

\_\_\_\_\_ Butterfly Class AND Explorers Class (Circle days of Butterfly attendance: Mon Wed Fri)

\_\_\_\_\_ **Extended Care -11:45-2:00** on Wednesdays

**Priority Placement** (Please check all that apply):

\_\_\_\_\_ I am planning on running for a board position in 2014-2015 (anticipated priority)

\_\_\_\_\_ I am a former board member. Please indicate the years of service: \_\_\_\_\_

\_\_\_\_\_ I am a returning preschool family. Please indicate number of years of prior enrollment: \_\_\_\_\_. Prior attendee's name: \_\_\_\_\_

\_\_\_\_\_ I am a returning parent/toddler family. Please indicate number of years of prior enrollment: \_\_\_\_\_. Prior attendee's name: \_\_\_\_\_

**I understand that Bright Beginnings is a parent participation preschool. I understand that my continued enrollment is contingent upon fulfillment of the mandatory member requirements in addition to the selections I make on the Family Requirements Form.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**For Office Use:**

Fees paid: # \_\_\_\_\_ Amt: \_\_\_\_\_ Class Placement: \_\_\_\_\_