2024-2025 Enrollment Form

Date of application _____

Child's name _____ Gender M ___ F ___ Birthday _____/_____/_____
First Last

Address_____ Best Contact number: _____

Father's name _____	Mother's name _____
Father's cell #_____	Mother's cell # _____
Father's email _____	Mother's email _____

Pick up information:

Only individuals listed below and the parents/guardians listed above are allowed to pick up the child.

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

UNDER NO CIRCUMSTANCE MAY MY CHILD BE RELEASED TO:_____
(Please provide photograph of person to whom child cannot be released)

I give permission to Wolcott Hill Preschool to authorize emergency care for my child if needed. ☐ Yes ☐ No.

Please choose number of days and choice of days. If space is not available in one or more of those days, your child will be placed in another day.

_____ 2 half days $235 monthly ($2,350 yearly) ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

_____ 3 half days $315 monthly ($3,150 yearly) ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

_____ 4 half days $390 monthly ($3,900 yearly) ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

_____5 half days $455 monthly ($4,550 yearly) ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Registration fee of $60 (non-refundable) and security deposit (June 2025 tuition payment) are due upon registration.
(NOTE: Early registration fee of $50 (non-refundable) is valid until 2/29/24)

Please make check payable to Levittown Baptist Church or use this link for online payment https://gcli.breezechms.com/form/nspay3115929629

Parent's Signature: _____ Date: _____