



2025-2026 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 \$245 monthly (\$2,450 yearly) Monday Tuesday Wednesday Thursday Friday
_____ 3 half days \$330 monthly (\$3,300 yearly) Monday Tuesday Wednesday Thursday Friday
_____ 4 half days \$410 monthly (\$4,100 yearly) Monday Tuesday Wednesday Thursday Friday
_____ 5 half days \$475 monthly (\$4,750 yearly) Monday Tuesday Wednesday Thursday Friday

Registration fee of \$60 (non-refundable) and security deposit (June 2026 tuition payment) are due upon registration.
(NOTE: Early registration fee of \$50 (non-refundable) is valid until 2/28/25)

Please make check payable to *Levittown Baptist Church* or use this link for online payment <https://gcli.breezechms.com/form/nspay311592962938>

Parent's Signature: _____ Date: _____