CELEBRATION PRESCHOOL
APPLICATION FORM - 3'S
2027-2028

Child's Name_____

Name you would like child to be called at school_____

Date of Birth_____ Male/Female (please circle)
MM/DD/YY

Parent/Guardian 1 Name:_____

Home Address_____
Street Town Zip

Email_____ Cell Phone_____

Parent/Guardian 2 Name:_____

Home Address_____
Street Town Zip

Email_____ Cell Phone_____

Please indicate your first and second choices for the Three Year Old Program. If you are signing up for Exploration Zone, please indicate which days you wish to attend.

Three Year Old Program
Monday, Wednesday, Friday

____AM Program 8:45AM - 11:15 AM
$420 per month

____PM Program 12:30 PM - 3:00PM
$420 per month

Exploration Zone
Monday, Wednesday, Friday
11:30AM - 3:00PM

____ 1 Day per week _____
$200

____ 2 Days per week _____
$340

____ 3 Days per week _____
$480

Must be 3 by September 1, 2027

Signature of parent/guardian_____ Date_____