

SCHOOL APPLICATION FORM

Today's Date:
School Year You Wish to Start:

Office use only:			
Date Rcvd:			
Fee Rcvd:			
CPC Member:	Y	N	
Sibling at CPP	Y	N	

Name of Child:			Sex:	
Date of Birth:		Age by Sept. 1, 2025:	Yrs	Mos.
Mother's Name:				
Occupation:				
Email:				
Father's Name:				
Occupation:				
Email:				
Home Address:				
City	State	Zip		
Have any other children in the household at				
Church Affiliation:		CPC Mem	bers: Y	N
Child's Previous School Attendance: Where	e:		When:	
Enrollment consideration requires to application fee. Once a spot becomen form to complete and the \$125.00 February: however, we form	mes available for 0 registration fee	r your child, we will send yo	u a registra ation begins	tion

CHILDS DAY OUT PRESCHOOL Three-Year-Olds (3 by Sept. 1st) Toddler I (9 mos. – 14 mos. by Sept. 1st) T/W/Th Class ____ M-Th Class ____ T/Th Class Toddler II (15 mos. – 23 mos. by Sept. 1st) Four-Year-Olds (4 by Sept. 1st) T/Th Class ____ W/F Class ____ T/W/Th/F Class ____ M-F Class ___ Two-Year-Olds (2 by Sept. 1st) Five-Year-Olds (5 by Dec. 1st) M/W/F Class _ T/Th Class _____ M-F Class M/T/TH Class _____