

Tulane Kid's Academy Preschool

2102 Tulane Drive, Lufkin, Texas 75901

www.kidsacademy.net

Telephone (936) 699-2102

Jill Carswell, Director

REGISTRATION FORM

Child's Name: First _____ Middle _____ Last _____

Name to be used in class: _____ Gender: Male/Female

Date of Birth: _____ Age as of September 1st _____

Email Address to be used for school correspondence: _____

Address: _____ City: _____ State: _____

Home or Primary Phone #: _____ Child Lives with: _____

Mother's Name: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

Father's Name: _____ Cell Phone: _____

Place of Employment: _____ Work Phone: _____

Siblings: Name: _____ Age: _____

Name: _____ Age: _____

Previous school/childcare experience: _____

How did you hear about us? _____ Referral? _____

Total Paid \$ _____ cash/check# _____ Date _____

Along with this form, please submit the non-refundable registration fee of \$125.00 for first year enrollees (10% discount on additional children). At the time of registration, please bring a copy of your child's updated immunization records and a copy of their social security card or birth certificate. Once children are enrolled in the program, the annual non-refundable registration fee of \$100.00 (10% discount on additional children) will be due.

Please note that you are registering your child for the school year and that a 2 week written notice is required for withdrawal. I have read and agree to the terms of the registration and tuition policy.

Signature

Date