



CALVARY METHODIST PRESCHOOL

Calvary United Methodist Church
15 Ridge Place
Latham, NY 12210

Kari Planz, Director
Rev. Andrew Sperry, Pastor

REGISTRATION FORM

Today's Date: _____

Which class are you registering for?

<input type="checkbox"/>	Lunch Crew Session 1	Mondays and Tuesdays, January 4, 5, 11, 12, 18, 19, 25, 26, February 1, 2	\$5/day or \$50 for full session
<input type="checkbox"/>	Lunch Crew Session 2	Mondays and Tuesdays, February 22, 23, March 1, 2, 8, 9, 15, 16, 22, 23	\$5/day or \$50 for full session
<input type="checkbox"/>	Lunch Crew Session 3	Mondays and Tuesdays, April 19, 20, 26, 27, May 3, 4, 10, 11, 17, 18	\$5/day or \$50 for full session
<input type="checkbox"/>	*If your child will only be attending certain days - please circle them above		
<input type="checkbox"/>	Extended Day Session 1	Wednesdays, January 6, 13, 20, 27, February 3	\$75
<input type="checkbox"/>	Extended Day Session 2	Wednesdays, February 24, March 3, 10, 17, 24	\$75
<input type="checkbox"/>	Extended Day Session 3	Wednesdays, April 21, 28, May 5, 12, 19	\$75

Child's Name: _____

Parent/Guardian Name: _____

Primary Phone Number: _____

Parent/Guardian Name: _____

Primary Phone Number: _____

Emergency Contact: _____

Primary Phone Number: _____

--- OFFICE USE ONLY ---

Registration form received on	Payment Received	
Check Number	-or-	Brightwheel Account Set Up and Paid