

SHEPHERD OF THE HILLS PRESCHOOL

580 Trinity Drive
Vacaville, Calif. 95687
(707) 447-6278

Registration Form 2015-2016 School Year

Child's Name: _____

Child's Date of Birth: Month: _____ Day: _____ Year: _____

Mother's Name: _____ Father's Name: _____

Address: _____ Zip Code: _____

Phone #: _____ Work: _____

Congregation Affiliation: _____

Please state your preference for the following sessions. See attached fee schedule for prices.

4/5 Year Old Sessions ~ Pre-Kindergarten

3 Year Old Sessions

____ Mon/Wed/Fri 8:30am - 11:30am

____ Mon/Wed/Fri 8:30am -11:30am

____ Tues/Thurs 8:30am - 11:30am

____ Tues/Thurs 8:30am -11:30am

____ M-F 8:30am – 11:30am

Cherubs \$12.00 a day-see cost chart below/Drop In rate \$20.00 per day

Mon/Wed/Fri Cherubs

Tues/Thurs Cherubs

____ Mon ____ Wed ____ Fri

____ Tues ____ Thurs

Number of Days Attending	Equals Days Per Month	Total Additional Cost Per Month to Tuition
1	4	\$48.00
2	8	\$96.00
3	12	\$144.00

Registration Fee: A \$100.00 non-refundable registration fee is required when returning this form.

Parent's Signature

Date

For Office Use Only
Date Received: _____
Check# or Cash Receipt#: _____

____ I am interested in summer school