

# Presbyterian Preschool

## Registration Form

### 2025/2026 School Year

6474 Beechmont Avenue, Cincinnati OH 45230-2092

(513) 624-2333



<b>FOR OFFICE USE ONLY</b>
Date Received _____
Check _____ Cash _____

**\*\*Please indicate your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choices**

**2 ½ year old program** (must be 2 by 3/1/25)

\_\_\_\_ Mon./Tues. a.m. Wed. a.m. \_\_\_\_

**3 year old program** (must be 3 by 9/30/25)

\_\_\_\_ Mon./Tues./Wed. a.m. \_\_\_\_ Thurs./Fri. a.m.

**4/5 year old programs**

**Children enrolled in these 3 day Pre-K classes should be 4 yrs. of age by 9/30/25**

\_\_\_\_ Mon./Tues./Wed. a.m.

**Children enrolled in these 4 and 5 day Pre-K classes should be 4 yrs. of age by 8/1/25**

\_\_\_\_ Mon. –Thurs. a.m. (**Extended Day 9:30-1:00**) \_\_\_\_ Mon. – Fri. a.m.

Child's Full Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Birthdate \_\_\_\_\_ Preferred name to be used in school \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Email (print clearly) \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Name \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_ Home/ CellPhone \_\_\_\_\_

We are **active** members of Mt. Washington Presbyterian Church **Yes No**

Child enrolled in Presbyterian Preschool in 2024-2025 **Yes No** Has attended \_\_\_\_\_ years

Siblings currently enrolled in Presbyterian Preschool in 2024-2025:

\_\_\_\_\_ (has attended for \_\_\_\_\_ years)

\_\_\_\_\_ (has attended for \_\_\_\_\_ years)

Siblings previously enrolled in Presbyterian Preschool:

\_\_\_\_\_ (attended for \_\_\_\_\_ years)

\_\_\_\_\_ (attended for \_\_\_\_\_ years)

I grant permission for my child to be included in school photographs which may be used for preschool purposes(i.e. website, brochures, classroom photo sharing via Dropbox, Shutterfly, Google) **Yes No**

Preschool classes visit parts of the church other than those designated for preschool use (sanctuary, kitchen, church grounds) with their class and teachers.

I hereby authorize my child to visit all areas within the church or on church property with his/her class. **Yes No**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**A registration fee of \$55.00 per child must accompany this form.** Please make checks payable to **Presbyterian Preschool**. This \$55.00 does not apply toward tuition and will not be refunded unless your child can not be placed in a class.

A non-refundable tuition deposit of \$100(\$50 for the 1 day class) will be **due May 1, 2025**

***We look forward to you being a part of Presbyterian Preschool!!***

