First Steps
at Katy's First Baptist

For Office Use Only
Start Date_____
Class _____
M T W Th
Reg_____ Sup_____
May_____ Pay_____

Registration Form 2019-2020

Please complete this page and return with $20 application fee.

Toddler 2, 3, or 4 days; 2 year – 2, 3 or 4 days; 3, 4, & 5 years – 3 or 4 days

Child's Full Name _____Nickname_____

Days requested (please circle): Mon/Wed Tues/Thurs Tues/Wed/Thurs Monday thru Thursday

(We will call you as soon as possible if we are not able to accommodate your request)

Age as of 09/01/2019 _____Birthday _____Sex (Circle One) Male Female

Mailing Address _____
Street City Zip

Home Phone Number_____

Father's Name _____Cell #_____E-mail_____

Employer_____ Work Phone #_____

Mother's Name _____Cell #_____E-mail_____

Employer_____ Work Phone #_____

Church Affiliation_____ Subdivision_____

Names & Ages of Siblings

Name: _____Age_____Name:_____Age_____

Name: _____Age_____Name:_____Age_____

Please list below persons allowed to pick up your child.

Name	Phone #

I understand that this child will **NOT** be released from First Steps Preschool to anyone except the persons named above. Names can be added or deleted at any time. This change must be given to the First Steps Preschool office or child's teacher **IN WRITING**.

_____ _____

Signature of Parent or Guardian *Date*