FAITH CHILD DEVELOPMENT CENTER
410-761-9112
PRESCHOOL (Ages 2 - 4 Years) REGISTRATION FORM
SCHOOL YEAR 2026 – 2027
(August 31, 2026 - May 20, 2027)

Child's Name _____ Sex _____

Birth Date _____ Age (as of 9/1/2026) _____ Start Date _____

Home Address _____

City _____ State____ Zip_____ Phone #_____

Parent/Guardian_____ Email Address_____

Parent/Guardian_____ Email Address_____

Names of Siblings Registered: _____

Class Requested:

☐ Two-Year-Old ☐ Three-Year-Old ☐ Four-Year-Old

Class Schedules:

Five Day (M-F) ☐ Three Day (M/W/F) ☐ Two Day (T/Th) ☐
(Not available for Four Year Olds)

Class Options:

☐ Morning School Only (8:30 a.m. - 11:30 a.m.)
☐ Morning School with After Care (8:30 a.m. - 3:30 p.m.)
☐ Morning School with Before & After Care (7:00 a.m. - 5:30 p.m.)

A **non-refundable** registration fee of $200.00 (discounted registration fee for siblings is $175) has been paid to reserve a position for my child for the 2026-2027 preschool (ages 2-4 years) program beginning Tuesday, August 31, 2026, and ending Thursday, May 20, 2027.

Check Number _____ or Cash Payment _____

Faith Child Development Center admits students of any race, color, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admissions policies, scholarship programs, and other school-administered programs.

MSDE License #62567

Signature of Parent/Guardian _____Date_____

Office Use: Director's Initials/Date Received_____ New Student Packet Given_____ T/C_____ OM_____ AD_____