

## 200 E. Main Street 248-349-0911 ext. 216 Four Year Old Application~ 2017-2018 Application

CHILD'S NAME			
LAST	FIRST	MIDDLE	
CHILD'S BIRTH DATE	AGE _	SEX	
MONTH DAY YEAR			
HOME ADDRESS			
STREET		CITY	ZIP CODE
PHONE NUMBER			
AREA CODE	PHONE NUMBER		
EMAIL ADDRESS			
MEMBER OF FIRST PRESBYTERIA	AN CHURCH Y	ES NO	
FATHER			
ADDRESS (IF DIFFERENT FROM ABOVE)			_
	STREET		
PHONE -	CITY	ZIP CODE	
PHONE	AREA CODE	PHONE NUMBER	_
BUSINESS PHONE (or cell)	AREA CODE	PHONE NUMBER	_
MOTHER			
ADDRESS (IF DIFFERENT FROM ABOVE)			
	ST	REET	
PHONE	CITY	ZIP CODE	<del></del>
	AREA CODE	PHONE NUMBER	
BUSINESS PHONE (or cell)	AREA CODE	PHONE NUMBER	
APPLICATION FEE: \$100.00	(1=FIRST CHOIC	CE; 2= SECOND CHOICE	3=THIRD CHOICE) Date Received
FOUR-YEAR OLD PROGRAMS			Ck #
Must be 4 by December 2017			
			Amount
9:00 AM – 1:45 PM (MWF) Korp	ela <b>EXTENDED DA</b>	Y	
9:30 AM – 2:15 PM (MWF) Bug	gar <b>EXTENDED DAY</b>	or	
9:30 AM – 12:30 PM (MWF) Bu			
9:15 AM – 12:15 PM (MWF) Mc	Innis TRADITIONA	L FOUR'S	