

House of Bees Christian Preschool,
L.L.C.

26 South 100 West Hyrum, Utah 84319 435.770.7610
www.houseofbeeschristianpreschool.com

APPLICATION & REGISTRATION INFORMATION PREFERRED SCHEDULE & START DATE _____

I (we) request enrollment of the named child and supply information and consents as follows:

Child's Full Name _____
Preferred Name (or Nickname) _____ Child's Date of Birth ____/____/____

PARENT/GUARDIAN 1
Full Name _____
Address _____
Address _____
Phone #s: Home _____
Work _____ Cell _____
Occupation & Employer _____

Business Address _____
Email _____

PARENT/GUARDIAN 2
Full Name _____
Address _____
Address _____
Phone #s: Home _____
Work _____ Cell _____
Occupation & Employer _____

Business Address _____
Email _____

Siblings and others living in your home: Please list ages, relationship, and special circumstances.

Referred by & House of Bees connection (if any):

Does the child have any allergies, impairments or conditions? _____ If yes, explain, also describe special needs and requests. Please attach an additional sheet if necessary.

In case of illness, who can we contact if the child's parents cannot be reached?

	Home #	Work #	Cell #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The following are authorized to pick up the child:

	Relationship	Home #	Work #	Cell #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I (We) consent to allow this child's name, photograph or video to be used for news media, educational, statistical and promotional programs in print and Internet media, (delete non-consented words). I (We) agree to update and supply added information in writing as appropriate. I (We) acknowledge and agree to pay interest of 1½ % per month (18% PER ANNUM FINANCE CHARGE) on past-due accounts, reasonable attorney fees if collection of any balance is undertaken and pay \$20 processing fee on each returned check. I (We) agree to provide a two week notice to withdraw a student and agree to pay tuition until the end of the notice period. I (We) have read the policies of House of Bees Christian Preschool and agree to abide by them.

_____ Date _____
Parent/Guardian 1 Signature (Relationship)

_____ Date _____
Parent/Guardian 2 Signature (Relationship)