



Registration Form

Child's Name: _____

Age: _____ Date of Birth: _____

Parent's Name: _____

Phone & Email: _____

Address: _____

Club/Location Name: Creekside Christian Church Preschool

Class day & time: Wednesdays at Lunch Bunch

Fall Session Cost: \$90 per child - \$80 additional sibling

Payment Method: PayPal Suzanne (friends/family)- spvierling@gmail.com