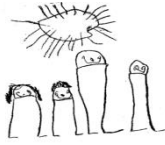


Bright Days Preschool



Campbell United Methodist Church • 1675 Winchester Blvd. • Campbell, CA 95008
Phone (408) 378-8422 • Fax (408) 378-8423 • E-mail: BrightDays@CampbellUnited.org

Enrollment Application 2017/2018

Child's First and Last Name _____

Birth date ___/___/___ male___ female___ Home Phone :(____) _____

Street Address _____

City _____ Zip _____

Parent's Name _____ Work Phone (____) _____

Cell/Pager (____) _____ E-mail: _____

Parent's Name _____ Work Phone (____) _____

Cell/Pager (____) _____ E-mail: _____

Class Enrollment Request:

___ 2's class (2 years to enter) [9am-noon] Days/week (please circle):

2(T/Th) or 2(M/W) or 2(W/F) or 2(M/F) 3(M/W/F) 5(MTWThF) Additional Day(s): _____

___ Multi-age class (3 years by September 1st) [9am-noon] Days/week (please circle):

2(T/Th) 3(M/W/F) 5(MTWThF) Additional Day(s): _____

___ Year before Kindergarten (4 years by September 1st) [8:45am-noon] Days/week (please circle):

2(T/Th) 3(M/W/F) 5(MTWThF) Additional Day(s): _____

➤ How did you hear about Bright Days Preschool? _____

To reserve a spot, we require a **\$100.00** non-refundable registration fee (\$95.00 for second/third child discount) and this completed form.

Please make checks payable to: CUMC

Signature of Parent or Guardian:

_____ Date ___/___/___/

Office Use Only

Approved by _____ Class Placement _____ Confirmation Letter, Reg. Packet, & Handbook Sent _____

Fees Paid \$ _____ Check # _____ Date Rec'd _____