

**SEEDS OF GREATNESS EARLY LEARNING CENTER**

**Pre-Registration Information**

Date: \_\_\_\_\_

**FAMILY INFORMATION:**

Email Address: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Date of Enrollment: \_\_\_\_\_

Child's Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Hours and Days child is scheduled to attend: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION (1):**

Name: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION (2):**

Name: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Registration Fee:

First child - \$50

Second child - \$40