

HPCCC Registration Form

Hampton Presbyterian Church Children's Center Preschool

2010-2011 School Year

2942 E. Hardies Rd * Gibsonia, PA 15044

info@hpcccpreschool.org

724-443-5340

(Please print)

___ Returning family after 1 year or more absence ___ Returning family from last school year
___ Church member ___ New to HPCCC

Full name of child: _____

As you would like them to be called: _____

Child's birth date: ____/____/____ Sex: M___ F___

Home phone number: () _____ Cell: () _____

Address: _____

City: _____ Zip code: _____

Mother's name: _____ Father's name: _____

Family email address:

You will be notified of your child's placement via email.

I would like my information included in the HPCCC directory:
Yes ___ No ___

Please make your class selection below by
writing 1st, 2nd and 3rd choice in the correct boxes.

| 2 Year Old Programs | | | 3 Year Old Programs | | | 4 Year Old Programs | | |
|---------------------|----|----|---------------------|----|----|---------------------|----|----|
| | AM | PM | | AM | PM | | AM | PM |
| MW | | | MWF | | | MWF | | |
| TTH | | | TTH | | | TWTH | | |
| Friday | | | | | | MTWTH | | |

Parent Signature: _____

Your Registration Fee & Field Trip Fee must accompany this completed form. See Fee Schedule for amount.
This fee is nonrefundable and checks are made payable to HPCCC.

Check/Cash: _____ Office Use Only: _____ Placement: _____
Amount: _____