



Little Explorers Nature Center Preschool

Pre-Registration Form
(please fill out front and back)

Child Information

Child's Name _____

Boy or Girl _____ Birth Date _____

Home Address _____
Street Apt. City State Zip

Please explain any special needs your child may have. _____

Parental/Guardian Information

1. Parent/Guardian Name _____

Address _____
Street Apt. City State Zip

Home Telephone Number _____ Cellular Number _____

Place of Employment _____

Work Telephone Number _____ Email _____

2. Parent/Guardian Name _____

Address _____
Street Apt. City State Zip

Home Telephone Number _____ Cellular Number _____

Place of Employment _____

Work Telephone Number _____ Email _____

Enrollment Information

Enrollment Options

5 days per week _____ Hours of attendance _____

4 days per week _____ Hours of attendance _____

3 days per week _____ Hours of attendance _____

2 days per week _____ Hours of attendance _____

If requesting 2, 3 or 4 days per week, do you need specific days or are you flexible?

*Requested start date _____

*We cannot guarantee requested start dates.