Kingdom Kids Preschool 25050 Ruther Glen Road Ruther Glen, VA 22546 804-994-2208



Welcome! Your child will have an exciting adventure in a safe and loving Christian environment here at Kingdom Kids Preschool.

Before completing the attached Registration Form, please be aware of our fees and general information:

• We will have one combined class for the 2017-2018 school year:

(schedule is tentative & subject to change, depending upon enrollment)

Tuesday/Thursday morning 3 year-old class from 9:00-12:00 Tues. /Wed. /Thurs. morning 4 year-old class from 9:00-12:00

 Non-refundable Annual Registration Fee (Due at time of registration) \$40.00

Tuition

3 year-old class
4 year-old class
(Due the first of every month)

\$80.00 \$100.00

- All checks for registration and tuition are made payable to Kingdom Kids Preschool.
- All children must be potty trained prior to the first day of school.
- A copy of your child's Birth Certificate must be on file at the preschool on the first day of class.
- A Medical Information Form with a complete immunization record, signed by your child's physician, must be on file at the preschool on the first day of class.

Kingdom Kids Preschool admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the preschool. Kingdom Kids Preschool does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs and other school-administered programs.

Jesus said, "Let the little children come to me, and do not hinder them, for the kingdom of God belongs to such as these." Mark 10:14b

Kingdom Kids Preschool

A Ministry of Cardinal Baptist Church

Registration Form

Name of Student		
Name your child would l	like to be called at school	
Male/Female	Child's Age	Birthday
Address		
City & Zip Code		
Home Phone		
Best Contact Number D	Ouring School Hours	
Church Attending		
Father's Name		
Occupation		Business Phone
Mother's Name		
Occupation		Business Phone
Parent's Address (if di	fferent from student)	
Name(s) and age(s) of s	sibling(s)	
School(s) or day care fo	acilities previously attend	led; any special notes or allergies
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Parent Signature		Date
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