

## Banner Elk Presbyterian Church Preschool

Registration	Form	2025-2	2026

Please return this form with your child's health assessment, current immunization record and **\$50.00** registration fee to complete your registration. Tuition: **\$330.00** per month.

Student's name:			
Age:	Da	ate of Birth:	
Parents Name:			
Home address:			
Phone Numbers; Mom cell #		Work #	
Dad cell #	Work # _		
Emails:			
In Case of Emergency Contact other the			
Relation to child:	Phone # _		
Child's Doctor:			
Phone #			
Does child have age appropriate vaccin	ations?		
Special Needs or other Medical Information	ation:		
Are you currently affiliated with the Ba	nner Elk Presbyterian (	Church or Preschool Program: Yes	No
Allowed to pick up from BEPC Preschoo	ol other than parents:		
<u>1.</u>	Relation:	Phone #	
<u>2.</u>	Relation:	Phone #	
Parent Signature:		Date:	