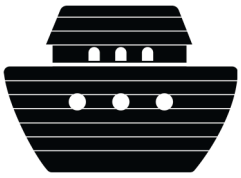
2026-2027 ARK PRESCHOOL REGISTRATION FORM



Child Information

First Name:_____ Last Name: _____

Preferred Name:_____ Date of Birth: _____

Child's age: _____ Gender: [ ] Male [ ] Female

[ ] Full time (4 days) Part time: [ ] 3 days [ ] 2 days

Preferred days: [ ] M [ ] T [ ] W [ ] Th

Parent/Guardian Information

Mother/Guardian

First Name:_____ Last Name: _____

Address: _____

Cell Phone:_____ Home Phone: _____

Work Phone:_____ [ ] Custodial Parent (If married, mark both parents)

Email: _____

Father/Guardian

First Name:_____ Last Name: _____

Address (if different): _____

Cell Phone:_____ Home Phone (if different): _____

Work Phone:_____ [ ] Custodial Parent (If married, mark both parents)

Email: _____

List any existing medical conditions, medication and/or special attention your child may require.

_____

Allergies: _____

Do you attend a church?_____If yes, where? _____

May we take photos of your child for publication (advertisement, Instagram, etc.) [ ] Yes [ ] No

Additional Emergency Contacts & Authorized Pickup Persons:

*Parents will be contacted first in an emergency

Contact/Pickup Name:_____ Phone: _____

Relationship to the Child:_____ [ ] Able to pick up all the children in the family

Contact/Pickup Name:_____ Phone: _____

Relationship to the Child:_____ [ ] Able to pick up all the children in the family

Special Instructions if needed: _____

2026-2027 Registration & Tuition Information:

Non-refundable Registration Fee:	$75.00	Due to secure placement
Full-time Tuition (4 mornings)	10 monthly payments of $410.00	

Tuition Payment Information

1. Cash or Checks (payable to Arbor Heights Community Church)
2. Payments can be made on AHCC's website - www.arborheights.org under Give. Select Preschool. Covering the transaction fee is appreciated but not required.
3. Zelle – if your bank participates – info@arborheights.org
4. Venmo - @ArborHeightsChurch

Tuitions are due by the 5th of each month. A late fee of $10 will be added if not received by the 10th.

Families are welcome to pay for the year in full.

Additional Comments & Information:

Is there an older sibling in the family? If so, what school do they attend? _____

Is there any other information that would be helpful to our Preschool staff? _____

_____

Parent's Signature:_____ Date:_____