



Child Information

First Name: _____ Last Name: _____

Preferred Name: _____ Date of Birth: _____

Child's age: _____
(as of September 5th)

Gender: ☐ Male ☐ Female

Part time: ☐ 3 days ☐ 2 days

☐ Full time (4 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 *1st Tuition payment is due by 9/10/26***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. September is the one exception. 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: _____