



Preschool Registration

A non-refundable registration fee of \$50 (\$45 for additional sibling(s)) must accompany this form. Please make your check payable to Little Acorn Academy and mail/drop off to the above address or Venmo @Little-Acorn. If we cannot offer you a class placement, your fee will be returned to you.

I am registering my child for: (please mark your 1st and 2nd choice)

_____ Tiny Seeds (must be 2 ½ to start by November 15)	Tuesday & Thursday 9:00-11:30	\$173
_____ Tiny Seeds (must be 2 ½ to start by November 15)	Monday & Wednesday 9:00-11:30	\$173
_____ 3 Day Sprouts (must be 3 by September 30)	Tuesday, Wednesday & Thursday 9:00-11:30	\$204
_____ 3 Day Sprouts (must be 3 by September 30)	Monday, Tuesday & Thursday 8:45-11:15	\$204
_____ Acorns AM (must be 4 by November 30)	Monday, Tuesday & Thursday 8:45-11:15	\$204
_____ Acorns PM (must be 4 by November 30)	Monday, Tuesday & Thursday 12:15-2:45	\$204
_____ Mighty Oaks AM For children planning to attend Kindergarten the following school year	Monday - Thursday 8:45-11:15	\$252
_____ Mighty Oaks PM For children planning to attend Kindergarten the following school year	Monday - Thursday 12:15-2:45	\$252
_____ STEAM AM	Tuesday & Thursday 8:45-12:15	\$162 (includes lunch bunch)
_____ STEAM PM	Tuesday & Thursday 11:15-2:45 or Monday & Wednesday 11:15-2:45	\$162 (includes lunch bunch)

*The times of the above classes may change by 15 minutes to accommodate a staggered start.

**These are the classes planned, but require a certain class size to officially open.

We will be in touch with your child's class placement.

Child's Full Name: _____ Name to be used at school: _____

Date of Birth: _____ Gender: M _____ F _____

Home address: _____ City and Zip: _____

Home Phone: (_____) _____ - _____

E-mail(s) to receive school communication: _____

Parent Name: _____

Cell Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Parent Name: _____

Cell Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Any additional information, medical or otherwise, that may be useful to the preschool staff:

How did you hear about Little Acorn Academy?

___ Internet Search ___ Oakwood Register ___ Dayton Parent Magazine ___ Referred by person _____

I hereby request that my child be enrolled in Little Acorn Academy. I understand that my child is registered for the full school term and tuition is due whether or not my child is able to attend classes. In the event of necessary withdrawal, one-month notice to the Director is required. My signature indicates that I have read and will abide by all the rules. Thank you!

Date

Signature of Parent or Guardian

Little Acorn Academy must be notified immediately of all changes concerning any of the information on this form. Thank you!