

# 2011-2012 PRE-REGISTRATION FORM

CHILDREN'S CENTER AT BEAR VALLEY

7900 Precinct Line Road

Colleyville, TX 76034

Child's Full Name \_\_\_\_\_

Name Used at Home \_\_\_\_\_ Male Female Birthday \_\_\_/\_\_\_/\_\_\_

Street \_\_\_\_\_ Age on September 1, 2011 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ Phone Number \_\_\_\_\_

Parent's Names \_\_\_\_\_

My child will attend:  M, T, W, Th  M/W  T/Th

Email address \_\_\_\_\_

\*CCBV reserves the right to place children in any classroom, and to refuse requests that are not in the best interests of the child, class, or program.

I understand that the supply fee and registration fee is non-refundable. Tuition is due by the first of each month starting August 1, 2011 and ending May 1, 2012. A two week notice must be given to the Director if your child is to withdraw from CCBV. Parents are responsible for tuition regardless of absences.

I acknowledge that a staff member has provided me with a copy of CCBV's Parent Document and discussed the contents with me.

\_\_\_\_\_  
Parent Signature Date

## Office Use Box

Date Received: \_\_\_\_\_ Personnel: \_\_\_\_\_

Registration: \_\_\_\_\_ \$25

Supply: \_\_\_\_\_ \$100 two days/ \$150 four days per week

Total Received: \_\_\_\_\_  Cash  Check # \_\_\_\_\_

Sibling Name: \_\_\_\_\_ Sibling Name: \_\_\_\_\_

Age: \_\_\_\_\_ Age: \_\_\_\_\_