



Application Form

Date: _____

Child's Name: _____ DOB: _____

Parent's Names: _____

Address: _____

Phone Numbers: _____

Email: _____

Start Date: _____

How did you hear of us? _____

Class – Parent's Day Out (PDO)

Days: M- Th 8:30am – 2:30 pm

***** Stepping Stones Preschool Use Only *****

I have received the following forms:

Enrollment ____ Policies & Procedures ____ Media Release ____
Immunizations ____ Sunscreen Release ____ Tuition Agreement ____
Release Waiver of Liability ____

Registration Paid (Cash or check #): _____

Child's Class: M-TH 8:30am – 2:30pm ID#: _____

Wait List Date: _____