



For Office Use Only	
Class	_____
Date Enrolled	_____
Amount Paid	_____
Check #	_____

2022/23 Registration

Child's Last Name	First Name	Nickname	Birthdate*	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address		City & Zip		
Mother's Name			Cell #	
Email (Please print clearly)			Work #	
Father's Name			Cell #	
Email (Please print clearly)			Work #	
Children entering the 3's class should be able to use the bathroom independently				

Day(s) desired for enrollment: Tuesday Thursday Both
***The Pre-K and Pre-Primary classes are a two-day option only.**

Sibling(s) Name(s)	Age

Who may we contact in the event of illness or injury if we are unable to reach you?

Name	Relationship to Child	Phone Number

To register your child, return this completed form to Jubilee Junction. A non-refundable enrollment fee of \$100 is due along with the form. *(Please make your check payable to Trinity Fellowship.)*