BAY LEAF BAPTIST CHURCH
LITTLE LAMBS LEARNING CENTER
REGISTRATION FORM
2010-2011

Date of Application: _____
Name of Child: _____ _____ _____
(Last) (First) (MI)
Name Called: _____
Birth Date: _____ Age: _____ Sex: _____
School last attended: _____
Preschool: _____ Days a week attended: _____

INFORMATION ABOUT THE FAMILY:
Parents'/Guardians' Names: _____ Home Phone: _____
Address: _____ Zip: _____
Mom's Cell Phone: _____ Dad's Cell Phone: _____
Email Address: _____

Does this child live with both parents? Yes _____ No _____
If answer to above is NO, who has custody? _____
List names and ages of any siblings: _____

Church now attending: _____ Pastor's name: _____
Church attendance: Regular _____ Occasional _____ Never _____

INFORMATION ABOUT YOUR CHILD:
Any Special Needs: No _____ Yes _____ Please explain:

Please select preference of days offered.

Class	**Days Offered**
Infants (1, 2, 3, 4 or 5 days)	_____ Monday _____ Tuesday _____ Wednesday _____ Thursday ____ Friday
Ones (2, 3, 4, or 5 days)	_____ Mon/Wed/Fri ____ Tues/Thurs ____ Mon/Thurs ____ Tues/Fri _____ Mon/Tues/Thurs/Fri ____Mon/Tues/Wed/Thurs/Fri
Twos (2, 3, 4, or 5 days)	_____ Mon/Wed/Fri ____ Tues/Thurs ____Mon/Thurs ____Tues/Fri _____ Mon/Tues/Thurs/Fri ____ Mon/Tues/Wed/Thurs/Fri
Threes (2, 3, 4, or 5 days)	_____ Mon/Wed/Fri ____ Tues/Thurs ____ Mon/Tues/Thurs/Fri _____ Tues/Thurs/Fri _____ Mon/Thurs _____ Tues/Fri _____ Mon/Tues/Wed/Thurs/Fri
Fours (2, 3, 4, or 5 days)	_____ Mon/Wed/Fri ____ Tues/Thurs ____ Mon/Tues/Thurs/Fri _____ Mon/Tues/Wed/Thurs/Fri
Transition (4 or 5 days)	_____ Mon/Tues/Thurs/Fri _____ Mon/Tues/Wed/Thurs/Fri

**Classes offered subject to enrollment. If you are interested in more days than are listed for a particular age or for different days than listed, please contact the director.

The information provided is true and correct to the best of my knowledge and is made with no reservation.

The registration forms, registration fee, and May 2011 tuition are due at time of application.

Date: _____ Signature of Mother: _____

Date: _____ Signature of Father: _____