

**RESURRECTION PRESCHOOL REGISTRATION
3315 GREENCASTLE ROAD
BURTONSVILLE, MD 20866
301-288-4665
preschool@resurrectionadw.org**

PLEASE PRINT IN UPPER CASE LETTERS.

Child's Name: _____
 First *Middle* *Last*

Nickname: _____ Male: _____ Female: _____

Birthdate: ___/___/___

Mother's Name

Father's Name

Address

Address

City *State* *Zip*

City *State* *Zip*

Home Telephone

Home Telephone

Business or cell Telephone

Business or cell Telephone

To whom should correspondence be sent? _____

Email address: _____

Children must be 3 years old by September 1st to be admitted into the 3 year old class. Children must be 4 years old by September 1st to be admitted into the 4 year old class.

All children must be toilet-trained by the start of school.

Birthdays after September 1st will be considered on an individual basis and a probationary period will apply.

Please check one in each column:

Column A

Column B

___ *Resurrection Parishioner
(Registered)*

___ *Sibling of child currently
enrolled in school*

___ *Catholic family from another parish
(Parish: _____)*

___ *Sibling of child formerly in the
school*

___ *Neither of the above*

___ *Student new to the program*

Resurrection Catholic Church Preschool
3315 Greencastle Road
Burtonsville, Maryland 20866
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_____ Three year old class – Tues/Thurs 9:30-12:00 (\$215 per month)

_____ Four year old class – Mon/Wed/Fri 9:30-1:00 (\$315 per month)

_____ Four year old class – Mon through Friday 9:30 – 1:00 (\$515 per month)

Registration Fee -- \$100 per year for new students
\$75 per year for returning students
(due at time of registration & non- refundable)

Activity Fee-- \$50 per year (due in September)

Please make all checks payable to: **Resurrection Preschool**
I understand and accept all the payment terms for this registration.

Signature

Date

Welcome to Resurrection Catholic Church Preschool. It is our privilege to serve both you and your child.