The Episcopal Preschool

2027-2028 APPLICATION FOR ENROLLMENT

(Please list all information as you would like it to appear on the class list)

Child's Name _____ Gender _____

Birth Date _____ E-mail Address _____

Father's Name _____ Mother's Name _____

Address _____ City _____

Zip Code _____ Mom's Cell _____ Dad's Cell _____

My child is currently enrolled in The Episcopal Preschool (EPS). Yes No

My child is a sibling of a child currently enrolled in EPS. Yes No

One of my children has previously attended The Episcopal Preschool. Yes No

I am (or my spouse is) a member of The Church of the Holy Spirit. Yes No

Please indicate the program you are applying for below. If the class in which you are interested is filled, you will be added to a waiting list with no fee.

The Twos Program	The Threes Program	Pre-K Program
T/TH _____	M/W/F _____	M - F _____
2 yrs before Sept. 1, 2027.	3 yrs before Sept. 1, 2027.	4 yrs before Sept. 1, 2027.

Registration Fee and Refund Policy: A registration fee of TWO HUNDRED FIFTY DOLLARS ($250.00) is due with this application. Please make the check payable to "The Episcopal Preschool." This registration fee holds a place for your child, if there is room. The registration fee will be returned if there is no room for your child. **If accepted, the registration fee is not refundable**.

Please read The Episcopal Preschool registration fee and refund policy above carefully before signing this application.

Signature _____ Date _____