## SPROUTS PRESCHOOL-River Trails

(Please return to <a href="mailto:Sprouts@firsthurst.com">Sprouts@firsthurst.com</a> or by dropping off to Director(s))



Registration Card					
Date:	Class:				
Child's age as of Sept. 1, 2024  Is your child potty trained? (Please circle) Y N		Are you a member at First Hurst? Y N If No, do you have a church home? Y N Where:			
Child's Name:		Birthdate	e:	M/F (circle one)	
Address:	City	, Zip	Phone:		
Mother's Name:Email:			Phone:		
Father's Name: Email:		Mobile Phone:			
Allergies:Person other than parents to cal					
Name	Relationship		Phone		
APPROVED PICK UP:					
Name	Driver's License	e # Phone			
Name	Driver's License	# Phone			
Name	Driver's License	#	Phone Phone		
T-shirt Size: (circle one): 18m 2	2T 3T 4T YXS	S YS			
Special Requests:					
Acceptance of this form and the nor secures your child a place at Sprouts 10 <sup>th</sup> of September.					
Registration, Supply Fee and T-shirt (\$15) Paid/ Amount \$			DATE:		

Check # \_\_\_\_\_ Cash: \_\_\_\_ Brightwheel: \_\_\_\_\_