



PARENTS' DAY OUT
FALL 2017 REGISTRATION FORM
First Baptist Church of Tucker
5073 LaVista Road, Tucker, GA 30084
770.938.1688 ext 230

Child's Name _____,
(Last) (First)

Birthday ___/___/___ Please check: Male ___ or Female ___

Parent's Name (s) _____ & _____

Street Address _____

City _____ Zip _____

Home Phone (_____) _____

Cell Phone _____

Cell Phone _____

E-Mail Address: _____

Primary language spoken in home: _____

Place of worship you attend: _____

(If you and your children do not currently attend a place of worship, we would love for you to consider the family of faith called First Baptist Tucker.)

Other children at home:

Name: _____ Age: _____

Name: _____ Age: _____

Parent #1 Employer: _____ Phone (_____) _____

Parent #2 Employer: _____ Phone (_____) _____

In Case of Emergency and neither parent can be reached:

Name _____ Relationship _____ Phone(____) _____

Name _____ Relationship _____ Phone(____) _____

New Students only - Referred By: _____

**PARENTS' DAY OUT
FALL 2016 REGISTRATION FORM**

Parents Day Out children may attend our program 1 to 2 days per week.

All children must be 6 months or older by September 1, 2016.

Registration Fee: \$50/One Day \$100/Two or More Days

Tuition: \$80/One Day \$145/Two Days

How many days are you enrolling your child? 1 day 2 days

My Choice of days is as follows (*Please rate these using 1 for your 1st choice, etc*)

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday

Children will be grouped by birth date into their classes as much as possible.

You will be notified immediately should your first choice of day(s) not be available.

_____ *Please check here if you have another child in preschool and you would like your Parents' Day Out days to coordinate with your preschool days.*

My older child will attend preschool on the following days: M Tu W Th F

I understand that the registration fee is NON-REFUNDABLE.

Your Signature: _____

Name (Please PRINT): _____

(Parent or Legal Guardian)

OFFICE USE ONLY: