

LANCASTER PRESCHOOL REGISTRATION

Parent's Name\_\_\_\_\_Child's Name\_\_\_\_\_

Address\_\_\_\_\_Phone #\_\_\_\_\_

Child's Birthdate\_\_\_\_\_

I prefer my child attend:

\_\_\_\_ 1 day/week                      \_\_\_\_\_mornings (8-11am)

\_\_\_\_ 2 days/week                      \_\_\_\_\_afternoons (12:30-3:30pm)

\_\_\_\_ 3 days/week                      Special arrangements needed:

\_\_\_\_ 4 days/week                      \_\_\_\_\_

Registration fee per family, per school year is \$40. To register your child, send completed form and registration fee to:

Lindsay Copsey  
630 3rd St.,  
Bloomington,WI 53804

Questions? Please call Lindsay Copsey, 608-412-3317