Little Lambs Preschool and Daycare Application for Enrollment

Child's Name:	Birth Date:	
Today's Date:	Desired Start Date:	
Parent/Guardian Name:		
(This parent will be called first in the eve	nt of an emergency)	
Address:		
Home Phone:	Cell Phone:	
Employed at:	Work Phone:	
Email:		
Address:		
Home Phone:	Cell Phone:	
Employed at:	Work Phone:	
Email:		
Church your family attends:		
Desired Program: 5 Full Days 5 Half Days M-W-F		
-	ogram (PreK only) Trinity Baptist Church Trinity Baptist School	

There is a \$25 non-refundable Application Fee that is due upon receipt of this form. Please make checks out to Trinity Baptist Church. We can also accept cash. Filling out this form does not guarantee enrollment. You must meet with the Director before your child is considered enrolled. There is a \$50 non-refundable Enrollment Fee that would be due at that time.