

Reg. Fee Pd.: Cash ____ Chk.#____ TE___

NEW FAMILY ENROLLMENT FORM

19102 Q Street 402-255-0000

www.imagineandexplorepreschool.com

Thank you for your interest in Imagine and Explore! Choosing a quality preschool program is one of the most important decisions you will make. We take your decision seriously and are committed to living up to the important responsibility of educating your child!

To register, please return this completed form to Imagine and Explore. A \$75 non-refundable registration fee will be processed the day you turn in this form as well as your Tuition Express document.

When your registration form and enrollment fee are accepted, you will only be contacted if your 1st choice of

classtime is <u>not</u> available. Start Date is Wednesday, August 14 & 15, 2024 (*Augu st	· · · · · ·	,	
Child #1 Name:			Female
Child #2 Name:	_Date of Birth	Male	Female
Parent/Guardian Information: Parent/Guardian #1	Parent/Guardian #2		
Address	Address		
CityStateZip	CitySt	ateZip_	
Cell/Home Phone	Cell/Home Phone		
Email	Email		
Classes will be filled on a first come, first served basis. (Please note that the 5-day program is designed for children that will be beginning Kindergarten the following fall.)			
1st Choice of Days and Class Time Desired:	2nd Choice of Do	ays and Class Tim	es Desired:
Tues/Thur: A.M. ClassP.M. Class	Tues/Thur:	A.M. ClassP	.M. Class
Mon/Wed/Fri: A.M. ClassP.M. Class	Mon/Wed/Fri:	A.M. ClassP	.M. Class
MTWRF: A.M. ClassP.M. Class	MTWRF:	A.M. ClassP	.M. Class
2-day program 3-day program 5-day program Mon/Wed/Fri: \$175.00/month \$235.00/month \$335.00/month			
Parent/Guardian's Signature X	Date		
Thank you for choosing Imagine and Explore!	"We are the Difference In Preschool Education"		
Office Use Only			