

## Kindergarten Application for Enrollment 2024-25 9:00 AM - 2:00 PM/Monday-Friday

Child's Name	Gender	Birth Date	
Preferred Phone #			
Email (Please print clearly)			
Public School your child is zoned for			
Are you a Current Concord Methodist	Church Memb	per?	
Father's Name	Cell	Phone	
Mother's Name	Cell	Phone	-
Is your child current on their vaccinations? Yes	No		
If no, explain:(we do not accept r	eligious exem	ption)	
Kindergarten Fees			
Registration Fee: \$150 (Due at registration)			
Curriculum Fee: \$150 (Due at registration)			
Tuition: \$550 (10 payments due monthly in June 2	2024 and from	August 2024 - April 2025)	

## FOR OFFICE USE ONLY

Date of School Visit \_\_\_\_\_ Date Application Received \_\_\_\_\_