Shining Light Christian Preschool Franklin Christian Church Summer 2019 Registration Form



Child's Name:	Birth Date:	Gender: M or F
Parent's Names:		
Address:		
Mother's Cell:	Email:	Text: Y or N
Father's Cell:	Email:	Text: Y or N
-	program this year. Please check the box week program will get spots before thos	•
June 4 th , 6 th , 11 th , 13 th , 18 th , and 20 th		
July 9^{th} , 11^{th} , 16^{th} , and 18^{th}		
Entire 5 week Summer Program:		
 Cost for 1 child: \$350.00 Cost for 2 children: \$650.00 Cost for 3 children: \$975.00 		
Monthly Program:		
June Only: \$215July Only: \$145		
*A \$50.00 registration fee will be char in Fall 2019.	ged to families either, not currently atte	nding Shining Light nor enrolled
Please make all checks payable to Fra	nklin Christian Church.	
Parent Signature:	Check #:_	
	Office Use Only:	
Date Received:	Registration Fee: Yes or No)
Child's Class:	Amount received:	