



# Preschool Registration Form

2023\_2024

Class #1: M, W, F 9-12 pm.

Class #2: T, W, Th 9-12 pm.

Class #3: T & Th 12-3 pm W 9-12 pm.



How did you hear about our preschool? \_\_\_\_\_ Nonmember \_\_\_\_\_ Member \_\_\_\_\_

Preschool Childs Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

☐ Boy ☐ Girl ☐ Decline to answer

Parents Name \_\_\_\_\_ Birthdate: \_\_\_\_\_ Phone: \_\_\_\_\_

Parents Name \_\_\_\_\_ Birthdate: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*\* This deposit is non-refundable \*\*** Waiver of Liability: I, the named participant in the above program(s), hereby waive any claim of bodily injury or property damage against the Ephrata Recreation Center, it's agents, servants, and/or employees while a participant in the above program(s). I understand and acknowledge that there are risks of injury in recreation activities.

Signature: \_\_\_\_\_

## Billing Information:

First Name:

Last Name:

Credit Card #

Expiration Date: (MM/YY)



CVV

Address if different than above:

By signing below you are authorizing the Ephrata Recreation Center to store your credit card information solely for the purpose of making payments for the Bright Beginnings Preschool Program (Play Activity) as indicated on the Program Payment Schedule.

Signature \_\_\_\_\_