

All classes dependent upon enrollment. To register, please return the form below.

REGISTRATION form must be accompanied by \$40.00 (non-refundable) registration fee. Make check payable to: "ASCENSION LUTHERAN ECC"

Please indicate your 1st and 2nd choice of classes.

____ 3's (MT) ____ 3's (Th/F) ____ 3's/Y4's (MT PM) ____ Young 4's (Th/F AM)

____ 4's (M/T/W AM) ____ 4's (W/Th/F AM) ____ 4's (M/T/W PM) ____ Pre-K (AM) ____ Pre-K (PM)

PK & K: ____ PK or ____ Kindergarten

CHILD'S NAME _____ male female BIRTHDAY: _____

PARENT'S NAME _____ PHONE: _____

ADDRESS: _____ ZIP: _____

EMAIL ADDRESS: _____

For Priority Registration Purposes: ASCENSION MEMBER: yes no (circle one) CURRENT SCHOOL FAMILY: yes no (circle one)

