

800 Amostown Road, West Springfield, MA (413)736-2770

mmpskids.com

**PRESCHOOL REGISTRATION** (Starting age 2.9)

**2022-2023 School Year**

Today’s Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Choice (pick one)

\_\_\_\_\_ 9:00 to 1:00 Tuesday – Friday, 3 Day Program ($350.00 per month)

\_\_\_\_\_ 9:00 to 1:00 Tuesday – Friday, 4 Day Program ($420.00 per month)

\_\_\_\_\_ 9:00 to 1:00 Monday – Friday, 5 Day Program**\*** ($490.00 per month)

\**3 Day Program-Parents choice of days must be consistent.*

\_\_\_\_\_ Before School Program 8:00 – 9:00 $100.00 per month\*\*

\*\* Please indicate if you are adding the Before School Program. *A minimum number is required* *for this program to be available*. This program is also available as a drop-in option for a fee of $30.00/day. Payable the day the child attends.

**Child’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M \_\_\_ F \_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dad’s Name Mom’s Name Last Name

Address (include city/town) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dad’s E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mom’s E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By filling out this form and paying the non-refundable $75.00 registration fee, an additional fee of $25.00 for siblings, you are committing your child for the 2022-2023 school year. Registration is taken on a first come first served basis. When classes are full a waiting list is started. A bill for the first month’s tuition will be sent home in June, along with an enrollment packet. We must receive the payment and completed enrollment packet by July 30th to secure your spot for the upcoming year.

**Withdrawal of your child after August 1st forfeits the first month’s tuition paid.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT SIGNATURE

\_\_\_\_ Check here if you have more than one child enrolled. A sibling discount of $30/month is applied to the second and subsequent children.

**How did you hear about us?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**