

2021-2022 Registration Form

6114 Fishburg Road Huber Heights, OH 45424 Phone: 937-965-7929

Fax: 937-660-3066

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1. Personal Information

Child's Name:	<u></u> .	Age:	Birthday:		
Parent/Guardian Name:					
Phone Number:	Email:				
Street Address:				-	
City, State, Zip				-	

2. Choose a Program

Program	Cost	Days	AM (9:00-11:30AM) or PM (12:15-2:45PM)
2 Day (ages 2 ½ - 3)	\$130/month	T Th	AMPM
3 Day (ages 3 – 5)	\$155/month	MWF	AMPM
5 Day Kindergarten Readiness (ages 4 – 5)	\$250/month	MTWThF	AMPM

3. Reservation and Deposit

Classes are filled on a first come first serve basis. This registration form is required to reserve a seat for your child. Upon submission of this form, an email will be sent with an invoice for the non-refundable deposit of \$60. If paid prior to May 31, there is a \$10 discount on the deposit.

OFFICE USE:	Date	Rec'd By	Amount	Cash/Check/CC
Registration Form				
Payment				

First Steps Preschool admits students of any race, color, national, and ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship programs, and other school-administered programs.