



*Mary Elizabeth Center and
Preschool*

208 Main Street

P.O. Box 25

Jeffersonville, Vermont 05464

crystal@maryelizabethpreschool.org

Preschool: (802) 644-9109

Cell: (802) 777-0575

Mary Elizabeth Center & Preschool Enrollment / Registration Form 2017-2018

Today's Date:	Start Date:	Date of Birth:
Child's Name:		Age:

Mother's Name:		Mother's Occupation:	
Address:			
Town:	State:	Zip:	
Home Phone:		Work Phone:	
Cell Phone:		Email:	

Father's Name:		Father's Occupation:	
Address:			
Town:	State:	Zip:	
Home Phone:		Work Phone:	
Cell Phone:		Email:	

Other children and ages in family _____

Early arrival program 7:30am-8:00am _____#days of week M T W TH F

School Program 8:00am-3:00pm

Please Circle Curriculum 1 (Tues, Thurs)

Please Circle Curriculum 2 (Mon, Wed, Fri)

Aftercare program 3:00pm-5:00pm _____#days of week M T W TH F

Special needs: _____

To hold a place for your child, please complete and return this form with the nonrefundable fees of \$175.00 to:

Mary Elizabeth Center and Preschool, PO Box 25, Jeffersonville, VT 05464