

PILGRIM PRESCHOOL
2118 SOUTH THIRD AVE.
BOZEMAN, MT 59715
(406) 586-6060
www.pilgrimpreschoolmt.org

PRESCHOOL APPLICATION FORM

Date: ____/____/____ School Year: _____

Child's name: _____

Birth Date: ____/____/____ Current Age: _____ Gender: _____

Child is immunized: _____ *(required for enrollment)*

Mother's name: _____

Home phone: _____ Cell phone: _____

Father's name: _____

Home phone: _____ Cell phone: _____

Home address: _____

Mailing address: _____

Email address: _____

Class Days Desired:

_____ M T W Th F (3 years old by September 10 of attending year choose 2- 3 days)

_____ M T W Th F (4 year olds by September 10 of attending school year choose 3-5 days)

NOTE: A \$50.00 one-time pre-registration fee is required, unless there isn't a current opening available. If there is not an opening for your child, your child's name will be added to a wait list.