

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

PRESCHOOL APPLICATION FORM

2016-17 School Year

Date: ____/____/____

Child's name: _____

Birth Date: ____/____/____ Current Age: _____ Boy____ Girl____

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 desired: _____

_____ Tuesday only (2 1/2 year olds-by September of current school year)

_____ Tuesday and Thursday (3 year olds)

_____ Monday, Wednesday and Friday (5 years old by 9-10-2017)

NOTE: A \$25.00 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 and we will inform you when a position becomes available (fee would be due at that time). This is a nonrefundable fee.