

CHAPEL HILL UNITED METHODIST CHURCH

Early Learning Center/PDO

Child's Name: _____

Date of Birth: _____ Gender: _____

Address: _____

City/Zip: _____

Home Phone: _____

Check one:

- MON/WED 8am-2pm, 4 year olds (must be 4 by September 15, 2013)
- TUE/THURS 8am-2pm, 3 year olds (must be 3 by Sept 15, 2013)

List daytime phone numbers where parents can be reached.

Mother: _____

Father: _____

Guardian: _____

Parents' email addresses for correspondence:

Local church affiliation:

Other important information:

\$20 registration fee per family is required. Fees are \$36 weekly due the first day of the week your child attends.