

REGISTRATION FORM FOR ACCEPTANCE INTO WEE PALS MONTESSORI
PRE-SCHOOL

Name of child.....

Name of parents.....

Address:.....

Tel #: (h)..... (w)..... (c).....

Email address:

Year due to enter pre-school.....

Please tick the appropriate box:

I would like to register for half day 12:30 latest pick up \$2200.....

I would like to register for 2:00 latest pick up \$2450

I would like to register for enrichment program 4:30 latest pick up \$2600.....