



## CLC Registration 2020-2021 School Year

### DAY/POSITION FORM

Child's Name: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_

How did you hear about our program? \_\_\_\_\_

Please check the day or days you are requesting for your child to attend under both the first and second choices.

**First Choice:**

- ☐ Tuesday
- ☐ Thursday
- ☐ Both Days (Tuesday and Thursday)

**Second Choice:**

- ☐ Tuesday
- ☐ Thursday
- ☐ Both Days (Tuesday and Thursday)

### **Special Requests**

Please make any special requests at this time. Special requests cannot be made after this application has been submitted. Please list only one special friend. We will attempt to honor your requests, but there are no guarantees.

- Are you concurrently applying for this child to attend Prestonwood Christian Academy for the 2020-2021 School Year? ☐ Yes ☐ No  
(Please see information in enrollment packet.)

----- Office Use Only -----  
Date Received \_\_\_\_\_