

ABC Day School

Pre-Registration Form

Child's Name: (English) _____ Date: _____

(中文) _____ Date of Birth: _____

Gender: ___ male ___ female

Parents' Name(s): (English) _____ Home Phone: _____

(中文) _____ Cell Phone: _____

Address: _____ E-mail: _____

City _____ Zip _____

Please indicate the program you're interested in:

Pre-school Full Day Program:

___ 5 days (M ~ F)

___ 3 days (M, W, F)

Half Day Program:

___ 5 days (M ~ F)

___ 3 days (M, W, F)

After School Program:

___ Kindergarten & up (2:30pm-6:30pm)

___ Preschool (11:00am-6:30pm)

___ Preschool (7:30am-6:30pm)

Weekend Class:

___ Math (1:30pm-2:30pm)

___ Chinese (2:30pm-4:30pm)

We welcome your family and your child to ABC Day School.

The Pre-Registration form is to keep a record of your visit to our school.

Thank you for your interest.