

**APPLICATION FOR ADMISSION FOR 2024-25**  
**SMALL WORLD CHRISTIAN PRESCHOOL**  
2400 Winchell Ave.  
Kalamazoo, Michigan 49008

Name of Child \_\_\_\_\_  
(Last) (First) (Middle)

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ (We follow the State of Michigan school cut off date so preschooler must be 3 years old by September 1 for 3's class & 4 years old by September 1 for 4's class)

Home Address \_\_\_\_\_  
(No. & Street) (City) (Zip)

Email Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Church Affiliation \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Please indicate class preference:

<u>Three Year Olds</u>	<u>Four Year Olds</u>
_____ Monday/Wednesday 9 am-12 pm	_____ Monday, Wednesday, Friday 9 am-12 pm
_____ Tuesday/Thursday 9 am-12 pm	_____ Tuesday, Thursday, Friday 9 am-12 pm

Tuition: Three Year Old Program \$150/mo.  
Four Year Old Program \$195/mo.

**Please include a \$50 non-refundable registration fee with this application.**

Signature \_\_\_\_\_ Date \_\_\_\_\_