

# Eagle's Wings Preschool

## REGISTRATION 2022-2023

651 N Eagle RD, Eagle, Idaho 83651  
(208)-939-1351

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City & Zip: \_\_\_\_\_

Primary Email: \_\_\_\_\_

Age as of Sept 1, 2022 \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

M  F

Known Allergies: \_\_\_\_\_

Does your child have an receive any special services:? Please explain:

\_\_\_\_\_  
\_\_\_\_\_

Has your child attended preschool before:  YES  NO

If so, When/Where: \_\_\_\_\_

### Parent Information

Parent Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Emergency Name/Contact:

Name: \_\_\_\_\_ Cell \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Cell \_\_\_\_\_

Relationship: \_\_\_\_\_

### PROGRAMS - Please select one

- Turtles - 2 Year-Old Program**  
\$80/month  
(Age 2 by September 1, 2022)  
Monday  
9:30 AM - 11:00 AM
- Hippos Y3 Year-Old Program**  
\$185/month  
(Age 3 by November 1, 2022)  
Tuesday & Thursday  
9:15 AM - 11:45 AM
- Rhinos Y3 Year-Old Program**  
\$285/month  
(Age 3 by November 1, 2022)  
Monday, Wednesday, Friday  
9:15 AM - 12:15 PM
- Pandas Y4 Year-Old Program**  
\$265/month  
(Age 4 by November 1, 2022)  
Tuesday, Wednesday, Thursday  
9:15 AM - 11:45 AM
- Tigers 3 + 4 Year-Old Program**  
\$200/month  
(Age 3 by September 1, 2022)  
Tuesday, Thursday  
9:15 AM - 12:15 PM
- Giraffe 4 Year-Old Program**  
\$285/month  
(Age 4 by September 1, 2022)  
Monday, Wednesday, Friday  
9:15 AM - 12:15 PM
- Monkeys Pre-K**  
\$390 / month  
(Age 4 by September 1, 2022)  
Monday - Thursday  
9:30 AM - 12:30 PM

## Welcome to the Eagle's Wings Preschool Family!

I wish to enroll my child in Eagle's Wings Preschool. Enclosed is an \$100 non-refundable registration fee made payable to EWP. I understand one-month tuition is due on or before August 22, 2022. I understand tuition is paid one month in advance August 2022 through April 2023. Please email or drop-off registration forms to Ms. Shelli or the church office. **Please include copies of Immunization records and \$100 Registration fee made out to EWP.**

Office Use Only:

Date Rec'd: \_\_\_\_\_

Check No. \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date