



THE CHURCH IN THE HIGHLANDS ECC
APPLICATION & REGISTRATION
2011-2012

Child's name: _____ DOB: _____

Address: _____

Parents' names: _____

Home Phone: _____ Alternate Phone: _____

E-mail: _____

	<u>Class</u>	<u># of days</u>	<u>A.M or P.M.</u>
1 st choice:	_____	_____	_____
2 nd choice	_____	_____	_____

I am signing and returning this application with a **NON-REFUNDABLE** deposit of \$500.00, payable to **The Church in the Highlands ECC**, \$100.00 of which is the registration fee and \$400.00 which will be applied to tuition.

I have been informed that the first 2 payments are also **NON-REFUNDABLE**.

I am also aware that a **30-day notice** is required to withdraw my child from the program.

Parent's signature: _____ Date: _____

For Office Use Only:

- Discounts
 Service Fees
 Other