

Registration Information
2026-2027 School Year
Public

Child's Last Name: _____
Child's First Name: _____
Child's Birthdate: _____
Age of child on August 31, 2026: _____

Please complete the information below and return it along with the registration form to the main preschool door **on or before 10:30 am on Wednesday, January 14**. We will make every attempt to enroll children in your first choice; however, if that isn't possible, classes will be formed by a lottery conducted by Tammy, the Director, and Michelle, Administrative Assistant. You will be notified of your child's placement via text message or email no later than 5:00 pm on Wednesday afternoon. **If your child gets enrolled, you will need to bring the registration fee (cash or check made to Salem Baptist Preschool) to the preschool no later than noon on Friday, January 23 in order to complete the process and hold your child's spot.** Registration cost is \$125 for the first child enrolled and \$100 for each additional children in the same family and is **non-refundable for any reason**.

Parent Name: _____
(PLEASE PRINT)

Parent Email Address: _____
(PLEASE PRINT)

Best Phone Number to Text: _____

Please Number in order your preference, with 1 being first choice and 4 being last choice

Toddler Class	Two Year Old Class	Three Year Old Classes	Four Year Old Classes
____ Wed/Fri	____ Mon/Wed/Fri	____ Mon through Fri	____ Mon through Fri
	____ Tues/Thurs	____ Mon/Wed/Fri	____ Mon/Tues/Wed/Thurs
		____ Tues/Thurs	____ Mon/Wed/Fri
			____ Tues/Thurs

If we cannot enroll your child in your first choice, do you want to enroll him/her in your second or third choice?
____ Yes ____ No

Do you have another child that you are registering? ____ Yes ____ No

****Transition Registration (TK) will take place on January 27**

For office use only:

Contacted via text or email _____
Parent responded and wants to enroll _____
Parent responded and does not want to enroll _____