

**Woodinville Family Preschool  
Pre-Registration Application**

*Please complete one form for each child whom you wish to register.*

Before joining our program, we require one of the following. Please indicate which applies to your family.

- Attendance at Open House on this date \_\_\_\_\_
- Observation of applicable class on this date \_\_\_\_\_
- Alumnus or alumna of WFP
- Current member with sibling
- Current member wanting class out of sequence

Parent Name \_\_\_\_\_ Email Address \_\_\_\_\_ Preferred Class \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Child Name \_\_\_\_\_ Child Birthdate \_\_\_\_\_ Child Gender \_\_\_\_\_

Indicate any other classes that would be acceptable if your preferred class is not available. If your child is not within the age range for the class, please contact the Director prior to registration ([director@woodinvillefamilypreschool.org](mailto:director@woodinvillefamilypreschool.org)).

<b>CLASS</b>	<b>AGE / BIRTHDATE</b>	<b>DAYS</b>	<b>TIME</b>
<input type="checkbox"/> Prenatal/Infant	born by or after 8/31	Thursday	1:30 – 3:10
<input type="checkbox"/> Pre-Toddler	6 mos. by 8/31	Thursday	11:30 – 1:10
<input type="checkbox"/> Toddler AM	1 by 8/31	Thursday	9:15 – 11:00
<input type="checkbox"/> Toddler PM	1 by 8/31	Wednesday	6:15 – 8:00pm
<input type="checkbox"/> 1-Day A	2 by 8/31	Friday	9:15 – 11:00
<input type="checkbox"/> 1-Day B	2 by 8/31	Friday	11:15 – 1:00
<input type="checkbox"/> 3-Day	3 by 8/31	MTW	9:15 – 11:40
<input type="checkbox"/> Pre-K	4 by 8/31	MTW	12:15 – 2:45

Our registrars will contact you by email after February Open House and prior to March 1 to let you know the status of your application. Please check your junk mail and be sure to let our registrars know if you will be away from email during this time. If offered a class placement, you will have 72 hours to respond. If not offered a class placement, you will be automatically placed on the wait list for the class of your choice. If you have questions, please contact [registrar@woodinvillefamilypreschool.org](mailto:registrar@woodinvillefamilypreschool.org). Please keep a copy of this application.

Form Completion Date: \_\_\_\_\_