## Hoppy Trails Preschool 2024 Registration

Child's Name:		D.O.B
Preferred Star	↑† Date:	
Select Preferre	ed Hours: 0 8:00 AM - 4:00 PM	
	0 7:30 AM - 4:00 PM	
Select Preferre	ed Days: O Monday-Tuesday-Wednesdo	ay-Thursday-Friday
	O Monday-Wednesday-Friday	
	O Tuesday-Thursday	
Preferred Metl	hod of Contact:	
	0 Email:	
	O Phone:	
Guardian's Signature:		Date:

Note:

If we have a spot you will receive an email or phone call to set up next steps. This form will serve as waitlist registration if we do not have availability.

Please do not hesitate to email/call if you have questions.

Thank you!