

Office Use Only:	
Date Given: /	_/ Date Returned//
□ New □ Returning	Registration Amount \$

REGISTRATION FORM

2/06/24

Child's Name:		Date of Birth:	☐ Female ☐ Male	
Address:		City:	Zip:	
Mother's Name:		Cell #:	Cell #:	
Father's Name:		Cell #:	Cell #:	
Father's Email:		Mother's Email:		
Where did you hear a	bout us? □Banner □Website	☐ Referred by:	□ Other:	
Please check your requested program.	Half Day 8:30am-12:30pm	Extended Day 8:30am-3pm	Full Day 7am-6pm	
	2-Year-Old / Toddler (do	not have to be potty traine	ed)	
M, W, F	□ \$585	□ \$640	□ \$760	
T, TH	□ \$415	□ \$460	□ \$545	
M–F	□ \$885	□ \$990	□ \$1,150	
	Pi	reschool		
M, W, F	□ \$530	□ \$605	□ \$715	
T, TH	□ \$360	□ \$435	□ \$500	
M–F	□ \$850	□ \$945	□ \$1,125	
	Pre-Kindergarten Ad	vantage (5 day option only)		
M–F	□ \$850	□ \$945	□ \$1,125	
of registration. Children s TUITION: Billed on the 2	NON-REFUNDABLE fee (\$100 per tarting mid-year will also be charged at the following that the month, due the 1st of the managed pardize your child's attendance. A \$35	a registration fee regardless of the nonth. A \$30 late charge will be a	ne starting date. Assessed after the 5th of the month.	
	nrollment Packet must be completed p to the State of California's Public Hea		nool. This also includes proof of	
RETURNING STUDENT	S: Please notify the director of any ac	ddress changes or phone number	s occurring within the year.	
	1) 10% discount(s) for each additional ount per child for Geneva church men r in full.			
guarantee that your spot v	lren leaving school for the summer bu vill be available when you return. 2) A n full before your child's last day.			
SUMMER FEE: A \$50 fe	e will be assessed mid-May to help co	over costs for events and activitie	es during summer camp.	

State License #304370859. The GCC does not discriminate on the basis of race, color, national or ethnic origin.