



Rainbow Room Preschool 4-Year-Old Program Registration Form

1428 Menoher Blvd.  Johnstown, PA 15905  814-255-7220

Registration Agreement

I agree to enroll my child _____ in the Rainbow Room Preschool 4-year old program for the 2019-2020 school year. I understand that I will pay an initial registration fee of **\$40.00** if I register by February 15, 2019. This fee is non-refundable. If I register after February 15, 2019, the registration fee is **\$50.00**. The annual tuition will be **\$1,305.00**, which is due in early September. If you prefer, you may opt to pay the tuition in (9) monthly installments of **\$145.00** beginning in September and ending in May. All payments are due the first of the month. **Please make all checks payable to: Rainbow Ministries.**

Mother's Name _____

Father's Name _____

Address _____

City _____ Zip Code _____

Child's Birthdate ____/____/____

Mother's cell # _____ Father's cell# _____

Home Phone # (if different from above) _____

Email address _____

Classes will meet from 9 a.m. to 12:00 p.m. on Monday, Wednesday and Friday.

Signature of Parent/Guardian Date

Date