

2025-2026 Rainbow Corner Preschool Registration Form

Part of CARE for Children's Early Learning Program

| 5 Day a Week Program: Monday on Kindergarten readiness and STEM ar Kindergarten the following school year. (Full Tuition \$350.00 per month- Scholar 3 Day a Week Program: Tuesday classroom routines, social-emotional described for students who are new to promixed age class of 3, 4 and 5-year-old states. | nd is suitable for students w This is typically a mixed agarships available for familie * Wednesday * Thursday ~ gevelopment, and school-rea reschool or for families who | tho have previously ge class of 4 and 5-es who qualify.) 8:00a.m. – 11:00a. diness skills, includenced the flexibility | m. The curriculuing pre-math, lity of a 3 day a we | hool or students who will enter outs. Im focuses more heavily on teracy and STEM. This class is seek schedule. This is typically a |
|---|---|---|--|---|
| Child's Name | | Date of Birth Gender | | Gender |
| Address | | | | |
| Primary Phone # | | Secondary Phone # | | |
| | | | | |
| Mother's Name/Legal Guardian | | | | |
| Address | | | | |
| Primary Phone # ☐ Home ☐ Cell ☐ Work | Secondary Phone # ☐ Home ☐ Cell ☐ Work | | e-mail address | |
| Father's Name/Legal Guardian | | | | |
| Address | | | | |
| Primary Phone # | Secondary Phone # | | e-mail address | |
| What do you expect from a preschool program for your child? | | | | |
| How did you hear about our program? |) | | | |
| | | | | |
| Signature of Parent/Legal | | Date | e | |
| For Office Use Only \$25.00 NON-REFUNDABLE REGISTRATI Check #/Cash Date F Other Documentation Needed: | ON FEE Paid Received b | У | | |
| Financial Aid Form | Supporting D | ocuments for Final | ncial Aid | |
| Contact/Medical Information Consent Form Current Immunization Record | | | | |

Rainbow Corner Preschool is licensed by the Pennsylvania Department of Education and supported, in part, by the United Way of the Bradford Area, Inc.

