



APPLICATION FORM

Please complete the information below and return with a \$50 (non-refundable) check made payable to Kirk House Preschool and mail to:
1148 Johnson St., Menlo Park, CA 94025

Parent(s) Name(s) _____
Address _____
Home Phone _____ Cell Phone _____
Email address _____

Child's Name _____ Boy Girl DOB _____
Is mother or father a member of Menlo Church? Yes No
Has a sibling been at the school? Yes No

Please indicate your preference:

- 3-year-old class on Tuesdays and Thursdays from 9am - 12pm
- 4-year-old class on Mondays, Wednesdays, and Fridays from 9am - 12pm

Add-on classes to our regular program:

- 4-year-old "Lunch Bunch" class (ends at 2pm)

Office Use Only (Rev 7/13/2016)

Eligible Enrollment Year: _____ Class: _____

Date form and \$50 received _____ Check # _____