Mother's Day Out 2024-2025 REGISTRATION

| Mother | Ph. (H) | | | (C) | | |
|--|-----------------|------|---------|--------|---|---|
| Father | Ph. (H) | | | (C) | | |
| E-mail | | _ | | | | |
| Child | Gender: M | F | Age | D.O.B | / | / |
| Child | Gender: M | F | Age | D.O.B | / | / |
| Child | Gender: M | F | Age | D.O.B | / | / |
| Are you a church member? Yes No | | | | | | |
| Church Name | | | | | | |
| Do you have a student enrolled in Leon | Valley Christia | n A | cademy? | Yes No | | |
| If yes, please list name(s). | | | | | | |
| | | | | | | |
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| | | | | | | |
| Select which programs you will be regis [] 2 YEAR OLD CLASS [] 3 YEAR OLD CLASS [] 4 YEAR OLD CLASS | tering for. | | | | | |
| REGISTRATION FEE (INCLUDES MAT MONTHLY TUITION - \$195 DISCOUNT (If you qualify) - \$175 | ERIAL FEE) - S | \$10 | 00 | | | |

Please return this form with registration fee to LVBC.

A MINISTRY OF LEON VALLEY BAPTIST CHURCH www.lvbc.org