

PMCA

Precious Moments Christian Academy

Enrollment Application

Admission Date:

Student's Name:

Program :

Student's DOB:

Classroom:

Enrolling Parent's Name

Mobile/SMS Phone Number

Student's Home Address

City

Zip Code

Email Address

Home Phone Number

1. Is the child on any medication, including vitamins? yes no
2. If yes, please list
3. Date of last physical
4. Sign in / out 4 digit pin
5. Are you currently enrolled CCIS subsidy? yes no
6. If yes, which county? Pike County Monroe County
7. Is there a court/custody order in place? yes no

Registration Fee: \$35.00

Paid: Cash

Check

MC/Visa/Amex

I agree to promptly notify PMCA of any changes to the above information.
Providing false information can result in termination of childcare services.

Enrolling Parent's Signature

Date