

# Expanding Horizons Preschool

780 South Guardsman Way

Salt Lake City, Utah 84108

(801) 883-5335

## Application for Enrollment

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Work/Cell number: \_\_\_\_\_ / \_\_\_\_\_

Father's name: \_\_\_\_\_

Work/Cell number: \_\_\_\_\_ / \_\_\_\_\_

Days desired: M      T      W      Th (Please circle desired days)

Will you co-op? Yes      No (Please circle one)

Program Requested: (Please check one)

\_\_\_\_\_ 18 month-3 years class      8:45-11:15 a.m.

\_\_\_\_\_ 3-5 years class      8:15-11:15 a.m.

\_\_\_\_\_ 3-5 years class      12:30-3:30 p.m.

A non-refundable registration fee of \$50 is due with this application. Please make checks payable to Expanding Horizons. Please return the application to Michele Orphanakis. All information will remain confidential,

A Program of Valley Mental Health