



**TRANSITIONAL KINDERGARTEN  
REGISTRATION FORM  
2017-2018**

CLASSES OFFERED

Transitional Kindergarten

Mon – Fri

9:00AM – 1:30PM

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Child's Name \_\_\_\_\_

Age \_\_\_\_\_

DOB \_\_\_\_\_

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For Office Use:

CLASS ASSIGNED: \_\_\_\_\_

EMAIL SENT – DATE: \_\_\_\_\_

TEACHER: \_\_\_\_\_