



OFFICE USE ONLY

CLASS: _____
 DAYS: M, T, TH, F
 CHECK # _____
 DATE: _____
 TOUR: _____
 WL # _____
 WL DATE: _____
 SIB CL: _____
 STUDENT # _____

Registration 2025-2026 School Year

Child's Name _____

Child's Birth Date _____ Boy _____ Girl _____

Parent 1 _____ Parent 2 _____

Address _____ City/Zip _____

Parent 1 Cell: _____ Parent 2 Cell: _____

Primary Email Address _____

Choice of Classes (1 form per enrolled student)

Class	Age	Mandatory Days	Monthly Tuition	Choose Your Class
Bouncy Bunny	24-30 months	2-day program 9:30 am -1:30 pm	\$555	<input type="checkbox"/>
Terrific Tiger	3-3 ½ years	4-day program 9:30 am -1:30 pm	\$650	<input type="checkbox"/>
Happy Hippo	4-5 ½ years	5-day program 9:30 am -1:30 pm	\$690	<input type="checkbox"/>
Registration Fee Non-Refundable	New Families	<input type="checkbox"/> \$200 first child	<input type="checkbox"/> \$95 each sibling	
Registration Fee Non-Refundable	Current, Church, Waitlist, Alumni Families	<input type="checkbox"/> \$180 first child	<input type="checkbox"/> \$85 each sibling	

- Enrollment in our program is determined by the child's age on/or before 8/31/25
- Program Hours: 9:30 am to 1:30 pm (NEW! 4 hours/day)
- Bunny Class - we partner with the families to toilet train their child
- Tigers and Pre-K students must be toilet trained
- Registration Fees and First & Last Month Tuition are Non-Refundable

Days of Preschool:

Bunny: Mandatory 2 days: Choice Days: ____ M/Th ____ T/F (Please rank your preference)

Tiger: Mandatory 4 days: M/T/TH/F

Hippo: Mandatory 5 days: M/T/W/TH/F

*Minimum 2 teachers per classroom

Allergy Information:

My child has allergy concerns. I understand there will be additional forms to complete detailing all the appropriate information. Please briefly describe your child's situation. Please circle if medicine may need to be administered at preschool in case of a reaction: **YES NO**

Special Services Information:

My child receives Special services (ie. speech therapy, occupational therapy, physical therapy). I understand there will be additional forms to complete detailing the appropriate information. Briefly describe your child's situation. Parent/school (*Childfind*)/agency meetings (*Kindering, Encompass, Stepping Stones, etc.*) may be required prior to the beginning of school.

How did you hear about our Preschool Program?

- Facebook Website
 Community Preschool Fair Referral: Who can we thank? _____
 Current/Alumni Family

What is the primary language spoken in your household?

- English Chinese Japanese French
 Spanish Korean Other_____ German

Please Read and Sign:

I understand In The Beginning Preschool's **registration fee** and **first** (September 2025) and **last** (June 2026) month's tuition are **non-refundable**. The registration fee is non-refundable due to being applied to our administrative operating costs for office and classroom management of your student's enrollment. The **last** (June 2026) is not applied to the 30-day withdrawal notice or an emergency withdrawal.

Parent Signature: _____

Date: _____

PLEASE NOTE:

In the Beginning Preschool reserves the right to place a child in the class that is best for that child to succeed and thrive while in our program. Class assignments will go out by early August of each year, if not before.

We reserve the right to offer and/or change classes and curriculum models as needed. We reserve the right to adjust tuition for any shift in learning models. ITBP learning model includes In-person curriculum model; Cooperative remote learning model; and Hybrid learning model (combo of in-person and remote learning).



In The Beginning Preschool
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