

# Hooper Early Learning Center Student Registration

Father's Name \_\_\_\_\_

Address \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address \_\_\_\_\_

1. Child's Name \_\_\_\_\_

Age \_\_\_\_\_

Address \_\_\_\_\_

2. Child's Name \_\_\_\_\_

Age \_\_\_\_\_

Address \_\_\_\_\_

Beginning Date \_\_\_\_\_

Registration \_\_\_\_\_

Supply Fees \_\_\_\_\_

Monthly Tuition \_\_\_\_\_