



The Preschool at Allentown
4900 Allentown Road
Lima, Ohio 45807
(419) 339-2558
thepreschoolatallentown@live.com

2025/2026 Enrollment Form

(Please Print)

Child's First Name Last Name Name Used M F / /
Gender Date of Birth

Parent Authorizations

Initial all that apply:

- _____ My child may be photographed for use in preschool publications.
- _____ I understand that I must submit all forms including but not limited to enrollment form, medical form with immunization record, pickup list and handbook acceptance form prior to the first day of school.
- _____ I agree to the tuition costs for the class in which I am enrolling my child.
Monday/Wednesday/Friday 9-11:30 for \$135/month

Parent's Signature: _____ Date: _____

Address: _____

Phone Number: _____

What school will your child be attending for kindergarten? _____

What do you expect your child to gain from his/her preschool experience this year?

****Please return this form with the \$50 nonrefundable registration fee**