



The King's Christian School
5 Carnegie Plaza, Cherry Hill, NJ 08003

Registration Fee Received
Date:

2017-18 Registration Form (domestic families only)

Please complete this form in its entirety in blue or black ink. Print unless otherwise indicated.

Full Name(s) of Parent(s)/Guardian(s): _____

Please complete this portion of the worksheet **for students in grades 1 through 12.**

Student (first & last name)	Grade in 2017-18	Timothy Program (check if needed)	Busing* (check if needed)	Yearly Fee \$900	Schedule A 3:15 to 4:30 Schedule B 4:30 to 6:00 Aftercare Program (circle your choices)
1 _____	_____	_____	_____		Which schedule? A B # of Days per week: 1 2 3 4 5
2 _____	_____	_____	_____		Which schedule? A B # of Days per week: 1 2 3 4 5
3 _____	_____	_____	_____		Which schedule? A B # of Days per week: 1 2 3 4 5
4 _____	_____	_____	_____		Which schedule? A B # of Days per week: 1 2 3 4 5

***Check if you need busing** _____am or _____pm which route _____

Southern routes: Burlington Coat Factory, Turnersville; Babies R Us, Deptford

Northern routes: Wendy's, Bordontown; Chick-Fil-A, Burlington Township; TD Bank, Willingboro

Please complete this portion of the worksheet **for students in Pre-school and Kindergarten.**

Student (first & last name)	Grade in 2017-18 (circle one)	half or full day?	for pre-K only: indicate how many and what days	Aftercare Program (circle your choices; for full-day students only)
1 _____	Pre3 Pre4 Kindergarten	_____	M T W R F	Which schedule? A B # of Days per week: 1 2 3 4 5
2 _____	Pre3 Pre4 Kindergarten	_____	M T W R F	Which schedule? A B # of Days per week: 1 2 3 4 5