



Enrollment Request Form
Good Shepherd Education Center
305 East Smallwood Drive Waldorf, MD 20602
301-645-7550

Child's Name: _____
(Last) (First)

Home Address: _____
(Street) (City) (State, Zip)

Home Phone: _____

Pre-School (8:30 AM-11:30 AM)

Please select the program you are interested in having your child attend.

- PS2 Tuesday, Thursday
- PS3 Monday, Wednesday, Friday
- PS5 Monday through Friday

Pre-School Child Care (6:00AM - 6:00PM Monday through Friday)

Pre-Kindergarten (8:30AM - 12:30PM Monday through Friday)

Children must be 4 years old by September 1, 2017.

Pre-Kindergarten Child Care (6:00 AM-6:00 PM, Monday through Friday)

Children must be 4 years old by September 1, 2017.

Just For Twos (6:00 AM-6:00 PM, Monday through Friday) Full Time Child Care Program

Children must have had their second birthday before enrollment.

Please return request form and enrollment application with the non-refundable registration fee of \$150.00. Acceptance of all necessary forms and paid fees before the necessary dates assures a place of enrollment at Good Shepherd Education Center for the school year 2017/2018.

PARENT'S SIGNATURE: _____ DATE _____