



**Capitol Hill Cooperative Preschool  
2008-2009 REGISTRATION FORM**

✓	Class	Schedule		Registration Fee	Monthly Tuition*
<input type="checkbox"/>	2's - M/W	Mon / Wed	9:15 - 11:30 a.m.	\$50	\$125
<input type="checkbox"/>	2's - T/Th	Tues / Thurs	9:15 - 11:30 a.m.	\$50	\$125
<input type="checkbox"/>	2's - Either		9:15 - 11:30 a.m.	\$50	\$125
<input type="checkbox"/>	AM 3-5's	Mon - Thurs	9:00 a.m. - 12:00 p.m.	\$50	\$250
<input type="checkbox"/>	PM 3-5's	Mon - Thurs	12:45 - 3:45 p.m.	\$50	\$250
<input type="checkbox"/>	3-5's - Either	Mon - Thurs		\$50	\$250

\* All costs (such as parent education and field trips) are included in the tuition. There are no additional surcharges.

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Birth Date

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Parent No. 1 Name

\_\_\_\_\_  
Home & Work Phone Numbers

\_\_\_\_\_  
Address & Zip

\_\_\_\_\_  
Parent No. 2 Name

\_\_\_\_\_  
Home & Work Phone Numbers

\_\_\_\_\_  
Address & Zip (if different)

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
How did you hear about CHCP?

**Since the co-op is participant-oriented, what do you envision bringing to our community?  
(please write answer below)**

Check this box if you would like to receive information on financial aid/scholarships.

The registration fee and last month's tuition are non-refundable and are **required** to complete the enrollment process. **Incomplete applications, or those submitted without these fees, will be returned.** First month's tuition is due at orientation. Please make your check payable to CHCP.

\_\_\_\_\_  
Signature of Parent or Guardian

**Please return to the school:**  
Capitol Hill Cooperative Preschool  
2702 Broadway Ave E  
Seattle, WA 98102

**Fee Calculation:**  
2's: \$50 (reg. fee) + \$125 (last month's tuition) = **\$175**  
3-5's: \$50 (reg. fee) + \$250 (last month's tuition) = **\$300**

*Capitol Hill Cooperative Preschool does not discriminate on the basis of race, color, creed, national or ethnic origin, socio-economic status, gender, gender identity, sexual orientation or disability.*