



2023-2024 Preschool Reservation Form

Child's Name: _____

Gender: _____ Current Age: _____ Birthdate: _____

Parent/Guardian Name(s): _____

Best phone number to reach you at: _____

Email: _____

- | | | | |
|--------------------------|---|---------------|-------------|
| <input type="checkbox"/> | 3-year-old preschool T/TH
(must be 3 by Sept. 10, 2023) | 9:00-11:45 AM | \$180/month |
| <input type="checkbox"/> | 4-year-old preschool M/W/F
(must be 4 by Sept. 10, 2023) | 9:00-11:45 AM | \$225/month |
| <input type="checkbox"/> | Pre-K class T/W/TH
(must be 5 by Jan. 1, 2024) | 12:15-3:00 PM | \$225/month |
| <input type="checkbox"/> | Mixed Age class M/T/W/TH
(must be 4 by Jan. 1, 2024) | 9:00-11:45 AM | \$295/month |

Please return this form with a **\$50 non-refundable check or cash** to our Program Director. Final placement will be determined, and you will be notified of your child's assignment in May. Please contact us at treehouse@hacmt.com or 442-6782, ext. 2, if you have any questions.

Office Use:
Received by: _____ Date & Time: _____
Check #: _____ Amount: _____