

Tots-N-Teens Preschool Application 2024-2025

Sanilac Career Center



175 E. Aitken Rd., Peck, MI 48466
810-648-4700 X4230/ Email: msoper@sanilacid.org

Application Date: _____

License #DC760017377

Name of Child: _____ Gender: _____ Birthday: _____

Address: _____

Full Day Preschool (9:00 AM- 2:30 PM)

Cost: 1 day/week per month: \$20; 2 days/week per month: \$40; 3 days/week per month: \$70

Please indicate the days you prefer: We encourage you to have your child attend at least two days a week.

Tuesday _____

Wednesday _____

Thursday _____

Mother's Name: _____ Father's Name: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

Place of Work: _____ Place of Work: _____

Work Phone: _____ Work Phone: _____

Email Address: _____ Email Address: _____

If parents are separated or divorced, who has custody? _____

Does your child have any allergies; developmental delays or medical conditions we should be aware of? If yes, please list condition, medications or services your child is receiving.

Please submit application with \$25 deposit registration fee payable to:
Sanilac Career Center
(This \$25 deposit will go towards your child's first tuition payment.)