



Pecan Street Christian School

First United Methodist Church of Pflugerville

Registration Application Form

2021-2022

MWF T/TH M-F Kindergarten

Child's Name _____ M _____ F _____

Birth Date _____ Age on 09/01/21 _____

Home Address _____

City _____ Zip Code _____

Father: Name _____

Employer _____

Work Phone _____ Cell Phone _____

E-mail Address _____ ***MUST HAVE ON FILE

Mother: Name _____

Employer _____

Work Phone _____ Cell Phone _____

E-mail Address _____ ***MUST HAVE ON FILE

Name of church presently attending: _____

How did you hear about our program: _____

Signature of Parent/Guardian

Date

*** REGISTRATION FEE IS NON-REFUNDABLE***

Registration fee paid \$ _____ Check# _____/Tuition Express _____

Current Student Sibling FUMC member New Student