



7075 State Route 88
Ravenna, OH 44266
Phone: (330) 296-2892
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Randy Griffith, Superintendent
Michelle E. Seckman, Treasurer

MAPLEWOOD PRESCHOOL REGISTRATION FORM

CHILD'S NAME _____ CHILD'S BIRTHDAY _____

PARENTS NAME _____

ADDRESS _____

PHONE _____

PARENT'S SIGNATURE _____

A.M. OR P.M. CLASS (please circle one)



Please return this form with _____ registration fee to guarantee your child's placement in our preschool. The fees for the 2024-2025 school year will be \$90 per month.

There are forms that must be completed prior to your child starting preschool. **It is essential that the Medical Statement be completed and signed by a physician before the parent meeting.**

A letter will be sent to you in the fall indicating the date of the parent's meeting and your child's starting date for preschool.

If you have any questions, please feel free to contact me at (330) 296-2892 ext.551515 between 8:30 a.m. and 2:30 p.m. Monday-Friday.