



Medina County Schools' Educational Service Center Preschool Registration Form

Date: _____

Parent Name: _____

Address: _____

Home Phone: _____ Cell: _____

Child's Name: _____

Child's Age: _____ Child's Birth date: _____

Preference: A.M. P.M.

We prefer to email as much as possible. Please give us an email address that you check frequently.

Email Address: _____

Signature: _____

A \$30.00, non-refundable application fee is required to hold a slot for your child.

Please make checks out to:
Medina County Schools' ESC

and return with this form to

Medina County Schools' ESC
124 W Washington St.
Medina, Ohio 44256