



Bostley's  
REGISTRATION FORM

Child Care                  Preschool                  Before and After Public School Care  
School Age Summer Program      Private Kindergarten

Please check which location your child will attend:

\_\_\_\_\_ Bostley's Preschool Learning Center Inc.  
Fairfield Center 1504 Broad St. Montoursville, PA 17754  
570.368-8007 or fairfieldacademy@comcast.net

\_\_\_\_\_ Bostley's Preschool Learning Center Inc  
Dewey Ave, 1743 Dewey Ave. Williamsport, PA 17701  
570.327-1144 or bostleys2@comcast.net

\_\_\_\_\_ Bostley's Preschool Learning Center Inc  
Hughesville 571 Rt. #405 Hwy, Hughesville, PA 17737  
570-584-5303 or bostleys3@comcast.net

\_\_\_\_\_ Bostley's LLC  
Williamsport Center 918 Walnut St. Williamsport, PA 17701  
570.326-1665 or bostleys4@comcast.net

Name of Child(ren): \_\_\_\_\_ Birthdate \_\_\_\_\_  
\_\_\_\_\_ Birthdate \_\_\_\_\_

Today's Date: \_\_\_\_\_

Attendance will begin on: \_\_\_\_\_

Full Time \_\_\_ Part Time \_\_\_ Circle Part Time Days Needed M T W Th F

School District of Residence \_\_\_\_\_

Email Address \_\_\_\_\_ Phone # \_\_\_\_\_

Parent's Name (Printed) \_\_\_\_\_

Signature of Parent or Guardian:

\_\_\_\_\_  
Please attach check for any applicable registration fee and / or tuition payable to "Bostley's" and mail to the correct above address.

- \_\_\_\_\_ I am participating in the CCIS Program and my caseworker is \_\_\_\_\_