

MARSHALL



UNIVERSITY™

Pre-Registration Form

103 & 118 Corbly Hall
One John Marshall Drive
Huntington, WV 25755
(304) 696-6301

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Application Submission

Please email the completed form to Kelcie Blankenship @ jones506@marshall.edu. Upon submission of this form, you will be signed up for brightwheel and prompted to pay the \$50 registration fee. Once we have received payment your child will be added to the appropriate list/wait list.

Today's Date: _____ Date of Desired Enrollment: _____

Child's Name: _____ Male or Female
(circle)

Child's Date of Birth: _____ Child's Current Age: _____
(month / day / year)

Parent/Guardian: _____

Address: _____

Zip: _____ Home Phone: _____ Work/Cell: _____

Employer: _____

Email: _____

Does the child have a family member who is a Marshall University employee or student? yes or no

If so, please provide your MU ID #: _____

Should we be unable to reach the parent/guardian, is there an alternate person to contact?

Name: _____ Telephone: _____

I agree to complete the required forms for enrollment, provide current health report/immunization record for my child, and updates as required. I acknowledge that I will be responsible for a registration fee in the amount of \$150 upon accepting enrollment slot. I agree to pay an additional \$150 each September for materials to support my child's learning.

Signature of Parent/Guardian