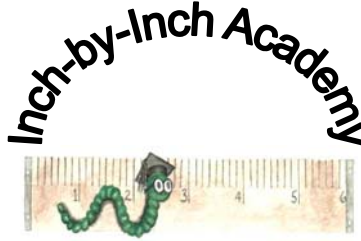


833 Pleasant Street  
Attleboro MA 02760  
Phone: (508)222-0856  
Fax: (508)222-1527



Corey L. Fisher  
Director

### Pre-Registration Application

<b>Child's Family Information</b>	
Child's Name _____	Name Used _____
Date of Birth _____	
Child's Address _____	
Father / Guardian Name _____	Mother / Guardian _____
Home Address _____	Home Address _____
_____	_____
Employer _____	Employer _____
Address _____	Address _____
_____	_____
Business Phone _____	Business Phone _____
_____	_____

<b>REQUESTED DAYS OF ATTENDANCE</b>	
Days: M T W TH F	Hours: _____ A.M. _____ P.M.
Requested Start Date: _____	

<b>HOW DID YOU LEARN ABOUT THE INCH-BY-INCH ACADEMY?</b>	
Personal Referral / If so, who? _____	
Newspaper _____	Other _____

PLEASE INCLUDE THE NON-REFUNDABLE \$75.00 REGISTRATION FEE WITH THIS FORM.  
THIS FEE WILL SECURE YOUR CHILD'S NAME ON OUR WAITING LIST