

# The Woodbrook Early Education Center

25 Stevenson Lane | Baltimore, Maryland 21212 | 410.377.8918



Child's Name: \_\_\_\_\_

Name To Be Learned In School: \_\_\_\_\_ Child's Date of Birth: \_\_\_\_\_ Gender: M/F

Address: \_\_\_\_\_  
Street \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Parent/Caregiver 1 Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent/Caregiver 2 Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Please register my child for the following package during the 2026-2027 School Year:  
(Please circle which package you would like.)**

**Please circle how many days:**

Package 2A	Package 3A	Package 4A
Package 2B	Package 3B	Package 4B
Package 2C	Package 3C	Package 4C
Package 2D	Package 3D	Package 4D

**2      3      4      5**

**My child will attend school on:**

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_

**\*\*Please remember to include your non-refundable \$100\* Registration Fee with this form.  
Make checks payable to Woodbrook Baptist Church and write your child's name in the memo.**

How did you hear about us? \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

**\*\$100 per child/1<sup>st</sup> child. \$150 max Registration Fee per family.**

**NOTE: Registration begins Monday, January 12, 2026**

To be completed by WEE staff: DATE \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ CHECK NO \_\_\_\_\_

[www.weecenter.net](http://www.weecenter.net) and [Facebook.com/theweecenter](https://www.facebook.com/theweecenter)