

Tamalpais Preschool

Application: 2023-24 School Year

Child's Name:			
Child's Birthdate:		_ M	F
Parents' Name(s):			
Address:			
City:	State:	Zip Code: _	
Phone Number:			
Email Address:			
Days Desired: please select option(s) that you are interested in:			
 2 Days (Tues/Thurs) 3 Days (Mon/Wed/Fri) 5 Days (Mon - Fri) Pre-K (Mon-Fri) 			

We will contact you with registration information and availability once we receive your request. Please feel free to reach out with any questions to:

• Marcela Amador, Director: director@tamalpaispreschool.org

Mail completed form to: PO Box 1012, Mill Valley, CA 94942 or Email to: director@tamalpaispreschool.org