

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

Birth date \_\_\_\_\_ Phone \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Class Preference:

3-4 Year Olds: \_\_\_\_\_ 2-Day Tuesday/Thursday 8:30-11:30 a.m.  
(must be 3 by September 1<sup>st</sup>)

4-5 Year Olds (must be 4 by September 1st):

\_\_\_\_\_ 3-day Monday/Wednesday/Friday 8:30-11:30 a.m.

\_\_\_\_\_ I am interested in the following day(s) for Enrichment 11:30 a.m.-2:30 p.m.

\_\_\_\_\_ Monday \_\_\_\_\_ Wednesday \_\_\_\_\_ Friday