

2011 Summer Mobile Infant/Young Toddler Registration Room 1

____ Please register my child for the June Session – June 1-28
(Closed June 29 & 30 for Maintenance)
(\$75 Registration Fee for June only)

____ Please register my child for the July Session – July 5-29
(Closed July 1 for staff professional development & July 4 for Holiday)
(\$75 Registration Fee for July only)

****(\$100 Maximum Summer Registration Fee)****

Please refer to the Summer Tuition and Fee sheet for information on tuition

Hours: 8:45 – 3:00

Ages: 7 - 17 months (children born between 4-01-10 and 1-31-11)

Child's Name: _____ Birthdate: _____

Parent/Guardian's Name(s): _____

Address: _____ City _____ (zip) _____

Phone: (H) _____ (W) _____ E-mail: _____

PLEASE CHECK DAY OR DAYS DESIRED:

Circle the number of days you would like your child to attend: 1 2 3 4 5

Indicate your 1st, 2nd, 3rd choice combination of days:

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

**Extended Care Registration
(3:00 – 5:30)**

Please circle day or days desired:

M T W TH F

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I acknowledge that if the number of days is reduced after April 14, 2011, I will have an obligation to the school for tuition for the dropped days until the school fills the opening. The school will make every effort to do so in a timely manner.

Signature _____

Office Use Only

_____ Reg. Paid Date/Check #

