



### Registration Form

Please fill out this registration form and return it in person or by mail with a \$75 registration fee per family and one week of tuition per child for your deposit. The tuition deposit will apply to the child's first week of attendance at the center. If you have any questions, please contact Kelly or Liz at 651-414-0857.

1. Child's Name and Date of Birth: \_\_\_\_\_

2. Child's Name and Date of Birth: \_\_\_\_\_

3. Child's Name and Date of Birth: \_\_\_\_\_

4. Child's Name and Date of Birth: \_\_\_\_\_

Child's Address: \_\_\_\_\_

Parent/Guardian: (1) \_\_\_\_\_ (2) \_\_\_\_\_

(1) Phone: (hm) \_\_\_\_\_ (wk) \_\_\_\_\_ (cell) \_\_\_\_\_

(2) Phone: (hm) \_\_\_\_\_ (wk) \_\_\_\_\_ (cell) \_\_\_\_\_

Requested Start Date: \_\_\_\_\_ Available Date: \_\_\_\_\_ M T W TH F Full Day Half Day

Additional Information:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_