

^ Rhymes & Reasons _____

Fall Enrollment Application Two, Three, and Four Year Old Classes

Date _____

Check No. _____

Child's Name _____ Age _____ Birthday _____

Parent/Guardian Names _____

Address _____

Daytime Phone No. _____ Evening Phone No. _____

What day will you need to begin care? _____

Circle the Days that Your Child Needs Care:

M T W Th F

I understand that regular tuition is to be paid by check or money order every Monday regardless of vacations, illness, or other absences.

List Allergies: _____

Comments: _____

Parent Signature _____ Date _____

All enrollees - please complete and return this form along with a \$30.00 per child registration fee. This is an annual fee. A separate form must be completed for each child in your family that you are enrolling.