

Program Application 2020-2021

Child's Full Name		Date of Birth
Current Student?	 Securing Fall placemer 	nt
New student?	O My child will start attend	ding on <u>(date)</u>
•	r Preschool as follows n: O Infants O Ones C	
Full-Time- Part-Time-	Mon thru Fri Mon thru Fri	7:00am – 6:00pm 8:00am – 11:30am
	3 days per week Monday • Tuesday •	7:00am – 6:00pm O Wednesday O Thursday O Friday
I enroll my child fo	r VPK as follows:	
Specify desired VPK Wrap Arou	ınd.	rm placement requires ELC-issued VPK Certificate) e VPK
·	s- School Age Child(ren) eded: O Winter Break O	Spring Break O No School Days
Specify Child's	T-shirt size	
Registration		
Full or Part time	e enrollment \$125.00	
Drop in	\$75.00	
Family rate (2+	children) \$200.00	
Sibling Discoun	t 10% (on oldest siblin	ng E/T only)
* Due at time of enrollme break in enrollment occu	ent, then annually each sum	nmer to secure fall placement. Due again when a
Parent Name (printed) _		Phone
Signature		Date