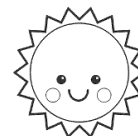




# The Caring Center / Verona Montessori House



## Summer 2017

### REGISTRATION FORM

(Please complete a form for each child)

#### Please fully complete all of the following information:

Check one: Continuing Enrollment \_\_\_\_\_ New Enrollment \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_

Address of above parent/guardian: \_\_\_\_\_

Telephone number: (H) \_\_\_\_\_ (C) \_\_\_\_\_

Email address: \_\_\_\_\_ First Day of Attendance: \_\_\_\_\_

### Summer 2017 - Session Starts Monday, June 12!

I would like to register for:

#### Traditional Preschool Programs:

2-3's (2 by start date) \_\_\_\_\_ 3-4's (3 by 9.1.16) \_\_\_\_\_

I would like to enroll for the following days each week:

M T W Th F

I will need: Full Days: \_\_\_\_\_ Mornings Only (8:00 am-12:00pm): \_\_\_\_\_

#### 4-5s PreK Traditional Preschool:

I would like to enroll for the following days each week:

M T W Th F

I will need: Full Days: \_\_\_\_\_ Mornings Only (8:00-12:00pm): \_\_\_\_\_

#### Verona Montessori House:

*Must be 3 by start date*

I would like to enroll for the following days each week:

M T W Th F

I will need: Full Days: \_\_\_\_\_ Mornings Only (7:50-11:00am): \_\_\_\_\_

Lunch Bunch (11:00am-12:15pm): M T W Th F

#### C.C.'s Clubhouse School Age Program:

I would like to enroll for the following days each week:

M T W Th F

School my child is attending: \_\_\_\_\_ Grade in the fall: \_\_\_\_\_

Vacations Planned: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

For office use only:

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

Registration fee: \_\_\_\_\_

Check Cash