

# REQUEST FOR CLASS ASSIGNMENT FOR 2012/2013 SCHOOL YEAR

Name of student: \_\_\_\_\_

Name student goes by (i.e., Jennifer/Jen): \_\_\_\_\_

Birth date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Name of parent(s)/guardian(s): \_\_\_\_\_

## PLEASE CHECK APPROPRIATE CLASS FOR YOUR CHILD'S AGE:

**3/4's Class** (Students entering kindergarten in two years.)

\_\_\_\_\_ Monday /Wednesday /Friday 9:00-11:30am

**PreK Class** (Students entering kindergarten in one year.)

\_\_\_\_\_ Morning Class - Monday through Friday 9:00-11:30am

**Afternoon Enrichment** (Open to morning students attending 3 / 4's or PreK Classes)

\_\_\_\_\_ Monday / Wednesday / Friday with Spanish Class 11:30-1:45pm

I understand that the registration fee I am paying in the amount of \$50 is non-refundable and non-applicable.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Comments? Questions?** Please use the back of this paper to make comments about car pools, work schedules or other information that will help us accommodate your family.

Office Use

Registration Fee: Check    Cash

Date application received: \_\_\_\_\_