



## Enrollment Application

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

Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Schedule Preferred (please check days and times needed):

Monday	Tuesday	Wednesday	Thursday	Friday
Regular Day (9am – 3:30pm)			Extended Day (8am – 6pm)	

Has your child had any playgroup experience, if so, where and for how long?

\_\_\_\_\_

Is there any specific information the school needs to know about your child?

\_\_\_\_\_

What benefits do you want your child to gain from this program?

\_\_\_\_\_

Where did you hear about the program? \_\_\_\_\_

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email completed pdf and a photo of your child to [thehummingbirds12@gmail.com](mailto:thehummingbirds12@gmail.com).