Request for Clubble Enrollment

CHILD INFORMATION

Enrollment requests are for children ages 3-5yrs. -- Children must be able to independently use the restroom.

1st Child's Name				Birthdate:			
			Will yo	ur child be elig	ible to enroll in kdgn	next fall? Yes No	
2nd Child's Name					Birthdate:		
			Will yo	ur child be elig	ible to enroll in kdgn	next fall? Yes No	
		**Th	is is the emo		NTACTS let you know if your ch	ild has a spot.	
**Parent/Guardian Name					Parent/Guardian Name		
Phone)				Phone		
**Email					Email		
Fees o				t schedule. The Club	HEDULE o will be open year round with schedules will only be considered.	th the exception of closings based on the dered if space is available.	
Requested Scheduled Days					Approximate Ho	Approximate Hours: (open 7:30am-4:00pm)	
M	Т	W	TH	F	Start time:	End Time:	
Requ	ested Exte	ended Ho	ours		Approximate Ho	ours: (open 4:00pm-5:30pm)	
M	Т	W	TH	F	End Time:		
Reque	sted Start D	ate					
WEEKLY RATES		Full Time between 7:30am & 4:00pm		\$195/w	eek		
			4 days/week between 7:30am & 4:00pm		\$160/w	\$160/week	
			3 days/week between 7:30am & 4:00pm		0am \$135/w	eek	
EXTENDED HOURS			(must be 4:00pm-	scheduled) 5:30pm	\$2.50/	day	
			поорт	отобрии		and the second s	

Breakfast, lunch and snack are included.

Registration fee of \$30.00 per child is required prior to enrollment.

Enrollment forms must be completed and immunization record submitted prior to start date.

Filling out this form does not guarantee enrollment.

Please watch for an email confirming your spot with a link to complete your registration.

Contact: Clubbies@bgcofdl.org 218-847-5700 ext.7