

Please mark the program and weeks your child plans to attend. If you are enrolling in the Two, Three, or Four day program, please mark the days you wish to attend (you cannot change the days your child attends week to week). If you mark a date, we are going to assume you are going to be here for that week. If you are unsure whether or not you will be there, please do not mark that week. Remember you are responsible for paying regardless of whether your child is here or not. We have a waiting list, so programs and weeks can not be changed unless there is an extreme circumstance. If you have any questions please talk to Sharon, Tiffany, or Sumer.

_____ Full Week Program	_____ 6/03-6/07
_____ Two Day Program	_____ 6/10-6/14
_____ Three Day Program	_____ 6/17-6/21
_____ Four Day Program	_____ 6/24-6/28
	_____ 7/01-7/05
	_____ 7/08-7/12
	_____ 7/15-7/19
	_____ 7/29-8/2
	_____ 8/5-8/9
	_____ 8/12-8/14 (\$80 per child)

Please sign and date stating you understand these obligations.

Parent Signature _____ Date _____