



Parent & Child Program Registration Form

Winter Session: Jan 9 – Mar 12, 2012

Child's First Name	Child's Last Name	Sex ♀ ♂
Please indicate any allergies or dietary restrictions		Date of Birth Year Month Day
Session Dates: <i>please choose one only</i>		Program Cost & Terms
<input type="checkbox"/> Mondays Jan 9 – Mar 12 <input type="checkbox"/> Tuesdays Jan 10 – Mar 6 <input type="checkbox"/> Saturdays Jan 14 – Mar 10 A snack is provided during the program. The winter session is 9 weeks, due to our holiday schedule.		\$220 per 9-week session. Please make cheque payable to: Waldorf Academy. VISA or cash also accepted. Registration is first-come, first-served. Payment in full is due with form in order to guarantee your placement. We cannot hold or guarantee spaces without payment. No refunds or credits for missed days or withdrawals.
Name of Parent or Guardian Attending		Full Mailing Address with Postal Code
<i>Due to room size restrictions only one adult can attend.</i>		
Primary Telephone Number		Emergency Contact Name
Secondary Telephone Number		Emergency Contact Number
Preferred Email Address		
Signature of Parent or Guardian		How did you hear about us? <input type="checkbox"/> I'm re-enrolling <input type="checkbox"/> Friend attended <input type="checkbox"/> Word of mouth <input type="checkbox"/> Website <input type="checkbox"/> Open House or Tour <input type="checkbox"/> Flyer <input type="checkbox"/> Advertisement _____ <i>(please specify)</i>
Date		

Please tell your friends about our Parent & Child program.