

Class Preference Form

Parent(s) Name _____

I would like my child, _____ **, placed on the list for the following...**

_____ AM Core Class- Tues., Wed., and Thurs. from 8:30-11:00; \$135/month

_____ PM Core Class- Tues., Wed., and Thurs. from 12-2:45; \$150/month

_____ Friday Literacy Class- Fri. from 11:45-2:45; \$60/month

I have included the following payments...

_____ \$50 Application Fee

_____ \$135 Enrollment Fee for AM Core Class

_____ \$150 Enrollment Fee for PM Core Class

_____ \$60 Enrollment Fee for Friday Literacy Class

-----**Preschool Use Only**-----

Child's Name _____

Parent(s) Name _____

Date Received _____

Check Number _____ **Check Amount** _____