

Tuesday A.M. Class

Friday A.M. Class



SEQUIM PRE-THREE REGISTRATION FORM

**Your child is enrolled when we receive: Registration form completed & signed \$25.00 registration fee
Immunization form completed & signed.**

Child's Name _____ Birth Date* _____ Sex _____

Parent/Guardian Names _____ Phone _____

Mailing Address _____ City _____ Zip _____

Email Address (*for Sequim Pre-Three announcements & info ONLY)

The Sequim Pre-Three program distributes a membership list to all members. Please indicate whether we may share your mailing address, phone number, and email address with other members. [] Yes [] No

Siblings and ages _____

Who will be attending class with your child? [If different than above, please include name & phone #.]

ENROLLMENT INFORMATION: * In the future of this program, your child's age on the date class begins may determine which class your child should attend; however, currently Sequim Pre-Three program will be offering two classes which will have multiple ages ranging from 10 months to 3 1/2 years old.

Tuesday Class for children 10 months - 3 1/2 years, 9:30: to 11:30 AM.

Friday Class for children 10 months - 3 1/2 years, 9:30: to 11:30 AM.

Quarterly tuition is \$75.00 (\$50.00 for each additional child) payable three times per year. A onetime registration fee of \$25.00 per year (\$5 for each additional child) must be submitted with this form at the time of registration. The registration fee is not refundable.

Registration can be mailed to:
Sequim Pre-Three
P.O. Box 2491 Sequim, WA 98382
Please make checks payable to Sequim Pre-Three

Class may fill quickly, so please return your registration promptly to reserve your child's spot!
If you should have any questions,
please call the Membership Coordinator at (360) 504-1011 .

EMERGENCY HEALTH INFORMATION:

Child's Name: _____

Emergency Contact _____ Phone Number _____

Relationship _____ Address _____

Doctor's name _____ Phone Number _____

Does your child have any allergies or health issues? Please specify:

Are your child's immunizations current? (An immunization record must be on file with the school prior to the first day of class. Children without this document on file forfeit their spot and will not be able to attend class)

_____ (Yes or No.) If immunizations are not current, please explain:



PARENT EDUCATION AGREEMENT:

As a participating student/parent in Sequim Pre-Three, I agree to fulfill the responsibilities listed below:

- To pay the registration fee of \$25.00 (\$5 for each additional child)
- To pay tuition by the second class of each quarter. A \$5.00 late fee will be assessed if tuition is late.
- To notify the Membership Coordinator and the Treasurer two weeks before leaving the school, making sure tuition is paid in full.
- To support and participate in the schools fundraising activities (10 hours per quarter or less).
- To come to class once a week with my child.
- To participate as "working parent" on a rotating basis as required.
- To serve on a committee or hold a leadership position in the school.
- To bring my child to class only if he/she is well.
- Provide a substitute parent for my child if I cannot attend class and to notify the Group Leader of the change.
- To abide by the policies and by-laws of the Sequim Pre-Three program.
- To enjoy myself, my child, and others.

I agree to the above Parent Education Agreement:

Parent's signature _____

Date _____