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WEEKEND REGISTRATION FORM

ECO-FRIENDLY PLEDGE

"Today, I will be kind to the earth, I will eat healthier foods for my body and I will encourage others to make better choices for the environment. By living eco-friendly each day, I will create a safer, healthier, greener life for myself and in the lives of others."

Today's Date:/	
Date of Enrollment://	
Child's Name:	
DOB:/	
Address:	
City: State: Zip:	
Phone:	

ATTACH CHILD'S PHOTO HERE

TUITION & HOURS

(Ages 3-12) Sat/Sun \$39.00 per child per class (no registration fee required) Saturday 9:00am - 12:30pm KGE Open Studio 1:00pm - 4:00pm Kidz Craft Green Other Classes Art in Nature · Lil' Picassos Recycle Paper Lab · Ooey Gooey Lab Sketch & Sculpt Seasonal Art Sunday 12:00pm - 3:00pm Birthday Parties!! We help educate on how to have an eco-friendly birthday

REGISTRATION POLICIES

discuss party details.

Please fill out all required forms. Payment by cash, check or accepted card is required at the time of registration. Thank you for choosing Kidz Go Eco!

and one that's fun & healthy! Please contact Miss Michelle

at 571-9444 to schedule your birthday party and to

Questions? Contact us. If you're a parent looking to enroll your child at Kidz Go Eco and have additional questions, please contact us at 571-9444 or visit our website at www.kidzgoeco.com.











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WEEKEND REGISTRATION FORM (PG 2)

PHYSICIAN'S INFO	PEDIATRIC DENTIST'S INFO		
Physician's Name:	Pediatric Dentist's Name:		
Address:	Address:		
City:	City:		
Phone:	Phone:		
CHILD PICK-UP LIST			
Person(s) designated to pick-up child other than parent	(s):		
Name:	Phone:		
Name:	Phone:		
Person(s) specifically <i>not permitted</i> to pick-up your child	d:		
Name:	Relationship:		
Name:	Relationship:		
PARENT'S INFO	(Please attach custody documents if applicable)		
Mother's Name:	Father's Name:		
Cell Phone:	Cell Phone:		
Home Phone:	Home Phone:		
Address:	Address:		
City: State: Zip:	City: State: Zip:		
Email:	Email:		
Employed By:	Employed By:		
Business Phone:	Business Phone:		
Employer's Address:	Employer's Address:		
City: State: 7in:	City: State: 7in:		

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WEEKEND REGISTRATION FORM (PG 3)

FAMILY INFO			
Language(s) spoken in the home:			
List other children in the family:			
Name:		Age:	Sex:
Name:		Age:	Sex:
Name:		Age:	Sex:
List other adults living in your home and their			
List pets in your child's home and their names			
List previous experience in child care includin child care, child care center, nursery school, n	_	attended, and type of car	e (such as family
EMERGENCY CONTACTS (OTHER THAN PA	ARENTS)		
Name:	Phone:		
Name:	Phone:		
Parent/Guardian Signature:		Date:	//