IIASTINGS RANCH	исе 1953″		FALL 2020 APPLICATION FORM APPLICATION FEE \$85	
Child's Name:				
Birthdate:	Age as of September 1st		🗆 Male 🗆 Female	
Parent/Guardian(s) Name(s	5):			
Address:				
City:	Zip Code:	Primary	Phone:	
Parent 1		Parent 2		
Cell Phone:		Cell Phone:		
Email:		Email:		
Occupation/Experience		Occupation/Experience		
LOWER SCHOOL (Students	must be 2 years of age	by September 1st)		
AM Program PM Program			3day) DT/TH (2day)	
UPPER SCHOOL (Students	must be potty-trained a	nd 3 years of age by Se	otember 1st)	
AM Program PM Program	□M/T/W/TH/F (□ T/W/TH (3day		3day) 🛛 🗖 / TH (2day)	
PRE-K PROGRAM (Student	s must be 4 years of age	by September 1st)		
Pre-K Program	□M/T/W/TH/F (· · ·	W/TH (3day) 12:30-3:30	
*STEAM Stay and	Play will also be offered	in the afternoons. Mu	st be 3 and potty trained.	
consideration of placemen	t. If our program is full,	your child will be place	cation fee of \$85 is required for ed on the wait list. Submitting this ings are subject to enrollment.	
Comments:				
Parent/Guardian Signature	:		Date:	

Воа

oard Member Due: January 10, 2	2020 / Current Family Due: Januar	γ 31, 2020
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Date Registration Fee Paid : _	Office Use Only		□ Returning □ Siblings
	🗆 Cash	□Check #	□ Alumni □ New