Date Registered	AGE on 8/1/20_	(years)	(months)
85 Kentucky A	HURCH NURSERY venue, Oak Ridge, Te email: unitedchurchn & AFTERNOON RI	nnessee 37830 s@yahoo.com	APPLICATION
NAME OF CHILD			
NAME TO BE CALLED		BIRTHDATE	
	HC	ME PHONE	
ADDRESS	(street or box #, city,	zıp code)	
EMAIL ADDRESS			
PARENT/GUARDIAN NAME		PHONE	
PARENT/GUARDIAN NAME		PHONE	
Please sign below indicating your permission to ha	we your family's name bove) on the class lists		and phone numbers (as written
Sigr	nature of parent/guardi	an	
Please sign below indicating your permission for y i	our child's picture to b n newspaper articles.	be displayed on bu	ılletin boards, event displays, or
Sigr	nature of parent/guardi	an	
Please sign below indicating your permission for yeagency staff, such as Department of Human Service Practicum students or service providers such as spe	es staff, Child Care Re	source and Referr	
Sig	nature of parent/guard	ian	
	INDICATE PREFEI		
MORNI 2 days/week Tues-Thu	ING CLASSES: 9:00 Irs		n-Wed youngest room only
3 days/week Mon-We		5days/week Mon thru Fri	
AFTERNOON CLASSES (n	ust be enrolled in m	orning to attend	afternoon)
Children must be at leas Mon 12:00-1:30	t 2-1/2 years old to at OR		lasses. 12:00-2:55
Tues 12:00-1:30	OR		12:00-2:55
Wed 12:00-1:30	OR		12:00-2:55
Thurs 12:00-1:30	OR		12:00-2:55
-Child's T Would you like to be contacted with in		United Church?	

SUBMIT REGISTRATION FEE WITH THIS FORM TO REGISTER: 2 day class \$65; 3 day class \$80; 4 day class \$95 (youngest class only); 5 day class \$110. Registration is not complete until this fee is paid.