



# Copeland Run Academy

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 copelandrun@gmail.com copelandrundacademy.org

## Application for Enrollment 2019 – 2020 School Year

### Child's Information

First Name	Middle Name	Last Name
If you use a nickname, what name do you prefer your child be called at school?		
Date of Birth	Female <input type="checkbox"/> Male <input type="checkbox"/>	Child lives with: _____ both parents _____ mother _____ father _____ other

### Parent/Guardian Information

Mother/Legal Guardian's Name			Father/Legal Guardian's Name		
Street Address			Street Address		
City, State, Zip Code			City, State, Zip Code		
Email address			Email address		
Home phone number	Cell phone number	Work phone number	Home phone number	Cell phone number	Work phone number

Please indicate your choice of program:

Twos – Must be 2 by 9/1/19		Threes – Must be 3 by 9/1/19		Fours/Pre-K – Must be 4 by 9/1/19		
T/Th 9:15 – 11:15	T/Th 12:15 – 2:15	T/Th 9:30 – 12:00	M/W/F 9:30 -12:00	M/W/F 9:00 – 11:30	M/T/W/Th 9:00 – 11:30	M/T/W/Th/F 9:00 – 11:30

Extended care is available to children in the **3s** and **4s** classes on an as-needed basis. If your child will require extended care on a **REGULAR** basis, please indicate the days below. Sign-up for occasional use will occur at a later date.

	Monday	Tuesday	Wednesday	Thursday	Friday
Early Drop-off					
Lunch Bunch					
Enrichment					

*The schedule for Enrichment classes will be available in September. The needs of our families are taken into consideration when determining the days and frequency that Enrichment classes are offered.*

Does your child have any allergies, restrictions or special requirements? \_\_\_\_\_

Enclosed is my non-refundable, non-deductible \$70 registration fee. Please make checks payable to, Copeland Run Academy.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date