

Cedar Springs Waldorf School

Parent-Child Program Enrollment Form 2018-2019 *(One form per family)*

Child's Full Name: _____ Date of Birth: _____
First Middle Last

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First Middle Last

List any food allergies for parents or children attending: _____

Please list contact information for the primary parent.

Parent Name: _____ Phone Number: _____

Email Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Optional: Name of Caregiver who will attend Parent-Child Class: _____

A minimum enrollment of four families is required per age group. If a session is cancelled due to low enrollment, refunds will be issued to those who pre-paid. We are unable to offer discounts for classes missed due to illness, travel etc. Please contact us if you have questions about which group is best for your child.

Daffodils- Wednesdays 12:45 – 2:45 PM
Approx. age 19-months* to three years

Sunflowers - Wednesdays 9-11 AM
Age three to four years

Session 1- Fee \$150 (5 weeks)

September 19, 26
 October 10, 17, 24

Session 2- Fee \$180 (6 weeks)

November 7, 14, 28
 December 5, 12, 19

Session 3- Fee \$150 (5 weeks)

January 16, 23, 30
 February 6, 13

Session 4- Fee \$240 (8 weeks)

March 6, 13, 20, 27, April 3
 May 1, 8, 15

*Children should be steady on their feet, rather than toddlers.

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\$ _____ Enter fee

\$ _____ Enter \$50 supply fee for additional sibling (i.e. twins).

\$ _____ Enter total due. All class fees must be paid in full PRIOR to session start date.

Please complete the front and back of this form. To reserve your space please include payment and submit this form to: Cedar Springs Waldorf School, 6029 Gold Meadows Road, Placerville, CA 95667 - Phone (530) 642-9903.

