

## Registration for Enrollment at Roots and Wings School 2023-2024

Child's Legal Name:			
(First)		(Last)	(Nickname if Applicable)
Child's DOB:		Ag	ge: Gender:
Child's Home Address:			
Parent/Guardian (1):		Parent/Guar	rdian (2):
Email:		Email:	
Phone:		Phone:	
Address:		Address:	
Please Indicate the service(s) yo	ur child will need:		
Class (select 1):	Full Day School Days (select 1):  2 School Days: T Th		Extended Care (select all that apply):
☐ Pre-K 3 (Age 3 by Sept. 30th and potty trained)			☐ Before Care (7:00-8:15): M T W Th F
☐ Pre-K 4 (Age 4 by Sept. 30th and	☐ 3 School Days: M V☐ 5 School Days: M-F		☐ After Care (1:45-2:45): M T W Th F
potty trained)  Graph Kindergarten (Age 5 by Sept. 30th)			☐ After Care (1:45-5:30): M T W Th F
School Registration Fee: \$60.00  Fees <b>MUST</b> be submitted with this for payable to Roots And Wings School	orm to secure your child	's spot or place	Extended Care Registration Fee: \$60.00 (if applicable) d on our waitlist. Checks can be made re non refundable.
(Signature)  FOR OFFICE USE: Amount:	Date:	Check #:	(Date) or Brightwheel