

CLASS ENROLLMENT FORM



Child's Name: _____

Child's Birth Date: _____

Parent/Guardian: _____

Address: _____

City: _____ Zip: _____

Cell Phone: _____

Home Phone: _____

E-mail: _____

Parent or Guardian Signature: _____

Print Name: _____

*** Class Time Preference ***

Monday: 11:30 - 12:00 _____

Tuesday: 8:15 - 8:45 _____

11:00 - 11:30 _____

Wednesday: 8:15 - 8:45 _____

* Due to limited availability, be sure to include at least 2 class choices

CLASSES BEGIN: Fall 2010 Session – August 16th; Spring 2011 Session – January 3rd, 2011

CLASS COST: \$125.00 per 15-week session (Make checks payable to: TESSI)

CLASS LOCATION: TESSI

705 W. Main Ste. B1, Carbondale IL 62901

Contact:

Alyce Ward (*Licensed KiddyKeys Educator*)

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