





Quakerbridge Learning Center 4044 Quakerbridge Road Lawrenceville, NJ 08619-1007 Phone: (609)588-4442 Cell: (609)933-8806 E-mail :qlc4044@quaker-bridge.com

Website: www.quaker-bridge.com

## **Program Enrollment Form 2022**

Student Name				Sex		
School				Rising Gra	ide	
Home Address						
City				ZIP Code		
Student Gmail	Account: (GMAIL)					
	Cellpl	none or contact text message:				
OPTION II INFO	Guid	Guidance Name Guidance Email				
Parent/G Name		Parent email address	Cel	Cellphone /Contact Name		Name
Mother						
Father						
Program Subject		Scheduled Date and Time	Progra	ram Length NOTE		NOTE
During the sum	nmer c	lass, center provides the followi	ng services	S		
I war	nt to be	e listed on the carpool network			∃ y€	es 🗆 no
I need transportation				□ yes □ no		

	I allow the Quak	erbridge Learning Center to take pictures of m	y child
			□ yes □ no
	I want to sign	up for the Quakerbridge's lunch plan	□ yes □ no
	** My child 	is allergic to certain food:	
Please	read and understand C	QBCLS Policy:	
1. 2. 3. 4. 5. 6. 7. 8. 9.	A Coupon is only valid There will be no refund QBCLS reserves the rig There are no refunds Early drop and late pic Enrollment and seat a Withdrawn get full refu QBCLS accepts the foll  Check Zelle Transfer  Wire Transfer  Cashier Check		oplications. e 8 with \$250 w/d charge
		al amount after coupon(discount) is with	way of payment
		ian:	