

Parent-Tot Program Registration Form 2018-2019

Child Information

Name		Gender
First	Middle	Last
Birth Date	Proposed Start Date	
arent/Guardian Information		
Name		
First	Middle	Last
Relationship to Child		
Street Address	a.	00.7
	City	State & Zip
Phone Home	Work	Mobile
Email		
NameFirst	Middle	Last
Relationship to Child		
Address		
	City	State & Zip
Phone Home	Work	Mobile
Eil		



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Session Registering For and Registration Fee

Please indicate your preferred session and your second choice. (You will be contacted by the oplacement.)	class teacher via e-mail with class
Mondays Fall Session (\$560)	
Tuesdays Fall Session (\$600)	
Mondays Spring Session (\$720)	
Tuesdays Spring Session (\$800)	
Mondays Fall & Spring Session (\$1,230 with \$50 discount)	
Tuesdays Fall & Spring Session (\$1,350 with \$50 discount)	
For registrations after a session begins, the registration fee will be calculated based on the nu session, with a rate of \$40/day. Please include a check payable to the Eastside Community Schapplicable registration fee.	
How did you learn about the Eastside Community School?	
Signature of Parent/Guardian	
Signature of Parent/Guardian	
	Date

Please return this form with the applicable registration fee to: Eastside Community School

Attention: Admissions 556 124th Ave NE, Bellevue, WA 98005

Or e-mail form to: admissions@threecedars.org