

Parents Night-Off 2023/24 | Registration Form



(circle all Date(s): that apply) Oct. 6 Nov. 3 Dec. 1	Jan. 5 Feb. 2 Mar. 1 Apr. 5 May. 3
ages: 3.5 - 10 yrs 6 -	8 pm \$42 / \$32 siblings
date:/	
Child, name:	age: dob:// boy/girl
Sibling, name:	age: dob://_ boy / girl
Sibling, name:	age: dob:// boy/girl
Parent/Guardian:	phone:
HomeAddress:	email:
Adult Responsible for Pick-Up (if different from al	bove):
O My child has the following allergies which ma	y be life-threatening:
O I am including an EpiPen and give permission	n for it to be administered in case of emergency.
	r photos to be taken during class activities, and to @A! for print or social media. (Children's names are
number of children PN	O date total
	
	Total

Please return completed registration with credit card information (below) to insure your child's placement.

No personal information is shared by P@A with any 3rd parties. Payments will be processed, cash and checks should be received, on the Wednesday before each PNO date.

CC No le	TI / /	OTTO	
CC Number:	Exp.:/		zip code.: