



CCNS Enrichment Enrollment Form

Please complete this form and return with payment to the office to secure placement.

CHILD'S NAME: _____ CLASS: _____

PARENT CONTACT INFORMATION: _____

Name/phone no. for person picking up the child on each day if other than parent:

MONDAY: _____

WEDNESDAY: _____

THURSDAY: _____

FRIDAY: _____

Mondays Gardening - Ms. Wendy - \$158 _____

Wednesdays Where in the World? - Ms. Adele - \$158 _____

Thursdays Lunch & Play - CCNS Staff - \$75 _____

Fridays Exercise - Ms. Carolyn - \$140 _____

TOTAL: _____

