



## Enrollment Options

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Please use the following chart to select your preferred schedule.

First, choose how many days per week you would like to enroll.

Next, using the guidelines, choose which days you prefer.

Last, please indicate your interest in early drop-off and/or extended day (non-binding).

**1) How many days per week would you like to enroll?**

- ☐ 2 Days/Week – Any two nonconsecutive days
- ☐ 3 Days/Week – Any three nonconsecutive days (two of the three days can be consecutive)
- ☐ 4 Days/Week
- ☐ 5 Days/Week

**2) What are your preferred days of the week?**

☐ Monday      ☐ Tuesday      ☐ Wednesday      ☐ Thursday      ☐ Friday

**3) Please indicate your interest (non-binding) in early drop-off and/or extended day.**

- ☐ Early Drop-Off – 8:00am-8:30am

Please indicate days:

- ☐ Extended Day – 11:45am-4:30pm\* (Children must be 2.9 for Extended Day)

Please indicate days & times:

We understand that each family has different needs. If none of these options work for your unique situation, please speak with our Director about customizing your child's care.