

Kigala Preschool

Kids Garden of Languages International Preschool

Registration Application for Spanish Toddler Session: May 10 - June 18, 2010

Parent(s) Name(s): _____

Child's Full Name: _____ Birthdate: ___ / ___ / _____

Address: _____ Home Phone: _____

Email: _____ Cell: _____

City: _____ State: _____ Zip Code: _____

Spanish Toddler Program 6 Week Session from May 10 – June 18:

09:30am – 11:30am TTH

For our information:

I would be interested in continuing the toddler program in September 2010.

Spanish Toddler Immersion/Learning

09:30am – 11:30am TTH

For our information: Would you be interested in additional days/hours?

Spanish Toddler Immersion/Learning Morning Group or **Afternoon Group**

Part Time 08:30am – 12:00pm

01:00pm – 3:30pm

Full Time 08:30am – 4:00pm

Please circle the days you would be interested in:

TTH MWF MTWTHF 4-day attendance (upon availability)

REGISTRATION APPLICATION SIGNATURE

I understand that filling out this application does not guarantee admission.

This form must be accompanied by a check payable to “Kigala, LLC” for a \$25.00 application fee, **for the 6 week session (non-refundable).**

Print Parent Name or Guardian: _____

Signature: _____ **Date:** _____