



## 2019 Pre-K Vacation Days Registration Form

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

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Tuition rates are \$47/day. We offer a 10% sibling discount for families with more than one child registered in our program. Payment is due at the time of registration. To cancel a registered day, the office must receive two weeks written notice. Spaces are limited and will be filled on a first come, first serve basis. Please fill out the information below.

I would like to enroll my child for the following days:

- |                 |              |            |
|-----------------|--------------|------------|
| ___ February 19 | ___ April 19 | ___ May 21 |
| ___ February 20 | ___ April 22 |            |
| ___ February 21 | ___ April 23 |            |
| ___ February 22 | ___ April 24 |            |
|                 | ___ April 25 |            |
|                 | ___ April 26 |            |

$\$ 47 \times \underline{\hspace{2cm}} = \$ \underline{\hspace{2cm}}$   
# of days      Total Amount

Amount paid: \$ \_\_\_\_\_

Payment and registration forms can be handed in at the office or mailed to:

The Children's Place at the Plaza  
P.O. Box 2102 ESP  
Albany, NY 12220