



**Child's Name:** \_\_\_\_\_ Home phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_  
Child's Birth Date: \_\_\_/\_\_\_/\_\_\_ Age as of October 1, 2020 \_\_\_Yrs. \_\_\_Months Gender: M F

**Father's Name:** \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
**Mother's Name:** \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Siblings: Name(s) \Age:** \_\_\_\_\_  
**Family Status** (please check): \_\_\_ Married \_\_\_ Divorced \_\_\_ Separated \_\_\_ Widowed \_\_\_ Single

**Contact person:** Please list two (2) people other than parents who would be available to pick-up your child.

**Contact Name (1)** \_\_\_\_\_ Relationship \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Contact Name (2)** \_\_\_\_\_ Relationship \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Person authorized other than parent to assume responsibility for your child**

Name: \_\_\_\_\_ Relationship \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Primary language** spoken at home: \_\_\_\_\_ Other language spoken: \_\_\_\_\_  
(Optional) Does your family attend a church? \_\_\_\_\_ Name of your church: \_\_\_\_\_

**Registration:** All Fun-N-Friends classes have a limited enrollment. All applications require a non-refundable registration fee of \$75 for returning families, \$85 for new families as well as an advanced tuition installment. Registration fee includes the \$10 security fee. The installment is 50% refundable prior to December 31, 2020. No refund after January 1, 2021. No adjustments will be made due to absences or illness. All classes are subject to change based on enrollment.

**Tuition Payment Options** (please select one): For your convenience, Fun-N-Friends offers two payment options:  
\_\_\_\_\_ Payment in Full: 5% discount for tuition paid in full by September 30, 2020  
\_\_\_\_\_ Monthly billing (remaining 9 installments): Payable monthly on the first of the months September–May.  
All returned checks and late payments are subject to a service fee.

How did you hear about us? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-mail address: \_\_\_\_\_ **Class:** \_\_\_\_\_