



Today's Date _____ Approximate Start Date _____

Child's Name _____ Birth Date _____

Home Address _____ Apt _____

City _____ State _____ Zip Code _____ Phone Number _____

Parent/Guardian 's Name _____

Email Address _____ Phone Number _____

Parent/Guardian 's Name _____

Email Address _____ Phone Number _____

Circle Age Group:

- | | |
|---------------------------------------|---|
| Infants (6 weeks – 1 year) | DK-2 Grade |
| Little Toddler (12-15 months-2 years) | 3 rd -4 th Grade |
| Big Toddler (2 years –3 years) | 5 th - 6 th Grade |
| Preschool (3-4 years) | |
| Pre-K (4-5 years) | |

Circle the days your child will attend and write in approx. drop off / pick up times.

Full Day Infant/Toddler/Preschool

Monday Tuesday Wednesday Thursday Friday

Approx. time of parent /guardian drop off _____ Pick up _____

Before School: Kindergarten - 12 years old

Monday Tuesday Wednesday Thursday Friday

Approx. time of parent / guardian drop off _____ / bus to school from Weymouth Child Care

Monday Tuesday Wednesday Thursday Friday

Bus to Weymouth Development Center After School / approx./parent/guardian pick up time _____

Reservations for attendance on full and half days off from school, as well as school vacation breaks are done two weeks prior.