

In order to plan for the year ahead, it is very important to know which students will be returning and/or siblings attending. Please complete this form and return by \_\_\_\_\_ along with the registration fee. All new students will need to fill out additional forms. For forms and any questions please contact Jaime Bunnell by phone 336.655.9536 or email [jaimelovesed@yahoo.com](mailto:jaimelovesed@yahoo.com). Thanks!

Our child, \_\_\_\_\_,  
(birth date with year \_\_\_\_\_), will be attending ABC.

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Alternate Address (if applicable) \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Mother's Work Phone \_\_\_\_\_

Mother's Cell Phone \_\_\_\_\_

Father's Work Phone \_\_\_\_\_

Father's Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

#### 2018-2019 Tuition and Fees

Pre-Registration (if paid before March 15th) \$80

Registration \$100

Monthly Tuition is due by the 1<sup>st</sup> of each month and is \$330

Two children is \$620

Lunch Bunch is from Noon-2pm, Monday-Friday and is \$12 per day.

Two children from the same family are \$20 per day.

\_\_\_\_\_ Yes, I am interested in my child attending Lunch Bunch.

\_\_\_\_\_ No, I am not interested in my child attending Lunch Bunch.

Please complete forms and return with registration fee to

Jaime Bunnell

816 Rollingwood Drive

Greensboro NC 27410

## Arts and Basics for Children Application

Date\_\_\_\_\_

Child's Full Name\_\_\_\_\_

Child's Preferred Name\_\_\_\_\_

Child's Birthday\_\_\_\_\_

Home Address\_\_\_\_\_

Brothers and Sisters? (names and ages)\_\_\_\_\_

Pediatrician\_\_\_\_\_ Phone\_\_\_\_\_

Important Medical Information\_\_\_\_\_

ANY allergies???

Parent\_\_\_\_\_

Occupation/Place of Employment\_\_\_\_\_

Home, Work, Cell Phones\_\_\_\_\_

Best Phone Number to Reach You\_\_\_\_\_

Email address\_\_\_\_\_

Parent\_\_\_\_\_

Occupation/Place of Employment\_\_\_\_\_

Home, Work, Cell Phones\_\_\_\_\_

Best Phone Number to Reach You\_\_\_\_\_

Email address\_\_\_\_\_

Who to Contact in Case of Emergency (other than parents)(cell please)

HOW did you hear about Arts and Basics for Children?\_\_\_\_\_

**Arts and Basics for Children  
Permission Forms**

By enrolling my child in Arts and Basics for Children, I understand the risk of accidental injury. By signing below I hereby agree to release the school, facility, and staff of liability and claims arising with my child's participation in this program. I give authorization to the staff to request medical treatment if necessary and I can not be reached.

Child's name \_\_\_\_\_  
Parent Signature \_\_\_\_\_  
Parent Name and Date \_\_\_\_\_

Arts and Basics for Children would like your permission to take your child on various field trips throughout the school year. The trips will take place during normal school hours and will not interfere with your normal pick-up time.

**You will always be notified in advance.**

\_\_\_\_\_ has my permission to participate in field trips with ABC during the school year.

\_\_\_\_\_ Parent Signature  
\_\_\_\_\_ Date

Please read and sign one option below...Questions- see Mrs. Bunnell  
We often take photos of our children doing different activities and place them on our facebook page or website.

I **give** ABC permission to use photos of my child.

\_\_\_\_\_ Parent Signature  
\_\_\_\_\_ Date

I **do not give** ABC permission to use photos of my child.

\_\_\_\_\_ Parent Signature  
\_\_\_\_\_ Date