

Busy Bee Nursery School
September Enrollment Form

Child's Name: _____ D.O.B: _____

Please **Circle** the number of days, which days, and time-slot

	3 Days	4 Days	5 Days	
Monday	Tuesday	Wednesday	Thursday	Friday
7:00-4:00	7:00-3:00	7:00-12:00		
8:00-4:00	8:00-3:00	8:00-12:00		

Parent Signature: _____

Address: _____

Phone: _____

Email: _____