



SUMMER 2010 REGISTRATION FORM*

Today's date _____ Start date June 7, 2010
 Child's Name _____ Birth Date _____
 1st Parent / Guardian's Name _____
 2nd Parent / Guardian's Name _____
 Address _____ City _____ Zip _____
 Email (for school use only) _____
 Home phone _____ 1st parent cell phone _____ 2nd parent cell phone _____
 1st parent work phone _____ 2nd parent work phone _____
 Museum Member (Must be at the family level or above) ___NO / ___YES, Membership number _____

Class- Please circle choice of class schedule and extended care.

Preschool & Kindergarten				AM care	PM care
T / Th	M / W / F	M - F	Full-time	M / T / W / Th / F	M / T / W / Th / F

Tuition and Fees due with registration form:

Non-refundable registration fee \$50.00

Non-refundable security deposit, one month's tuition (refer to fee sheet) _____

Total due _____

Tuition payment plan _____ One full payment _____ Two payments

___ Enclosed is my check for \$ _____ made payable to the Museum of Nature & Science.

___ Charge \$ _____ to _____ (name on card)

 Card number _____

 Expiration date _____ Security code _____ Billing zip _____

I understand I am responsible for the payment of all tuition and fees and that tuition and fees are non-refundable.
 I authorize Museum of Nature and Science to charge the above credit card for summer payments.

Parent / guardian signature _____

* Sending in this form with the fees does not guarantee a place in the school