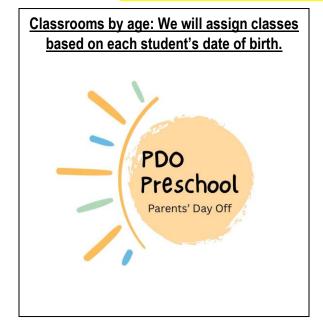
P.D.O. Waitlist Registration Form 2024-2025 School Year

Child's Name:	
Date of birth: placement is correct.)	(Please make sure birth year is written correctly so student
Parents' Names:	
Phone Number:	Email Address:

(For additional siblings, please fill out an additional page)

- Circle which days you are requesting your student to attend, <u>AND</u> choose your second choice on highlighted line below. Please note this is a waitlist registration form. If the spot requested opens up, you will be contacted.
 - Monday/Wednesday
 - Tuesday/Thursday
 - Monday/Tuesday/Wednesday
 - Tuesday/Wednesday/Thursday
 - Monday/Tuesday/Wednesday/Thursday
 - o Other:_____
- Please write your second choice for days attending on the highlighted line below:

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Tuition and Fees:

Registration Fee: \$75.00

*Please include your registration fee when you turn in this paper so we can complete your registration. The registration fee is a onetime fee that is nonrefundable. This fee is per child.

Monthly Tuition Rates:

1 day per week: limited availability \$115.00

2 days per week: \$215.00

3 days per week: \$315.00

4 days per week: \$415.00

Address: 114 N. Ironwood Dr. South Bend, IN 46615

Email: parentsdayoff@gmail.com

Phone: 574.232.6480