APPLICATION FOR RE-ENROLLMENT

Acorn KinderHouse

5300 Maybee Rd., Clarkston, Michigan 248-310-1059

	Maybee Rd., Clarks	S	
Address	Sex		
CityFamily E-mail	State	_ZipF	Phone ()
Parent 1 Name)	Parent 1 Name Address City Phone () Occupation Employer Employer Addr	Zip cell ()
Work Phone ()	<u></u>	Work Phone ()
Financial responsibility for app	licant assumed by		
Preschool/Pre-K Half Day 9: 3 or 4 days. Please speak to the Te Preschool/Pre-K Full Day 9: 3 or 4 days. Please speak to the Te Golden Acorns (Young Fives) Aftercare (anything after 3:00 pm to 6:00	eacher if you prefer 2 00 am-3:00 pm(mi eacher if you prefer 2 0 Monday-Thursd	mixed ages 3.7 -5 days. CIRCLE PRE xed ages 3- 5) Re days. CIRCLE PRE ay 9:00am-3:00p	EFERED DAYS: M T W TH ecommended for this age ecommended for this age EFERED DAYS: M T W TH effect of the manager of the manag
Before care (please speak with Teacher a		and separate contract	
practices on the basis of race, sex, color, rel members and board members are all expecte discrimination policy. A review of complete official student record	igion, national origin, ance ed to conduct themselves a ds is required for all transfo	stry, marital status or ag nd discharge their respo ers to Acorn KinderHous	iminate in admission, hiring, or employment ge. Furthermore, parents, students, faculty, stafonsibilities in accordance with the school's non-sec. se. s application. A non-refundable \$300.00 depos
will be required when the Tuition Agreemen			
	n days after the due date w	Il be subject to a \$30.00	onthly installments will have a finance charge of late fee. Additional fees will be assessed for ement is made.
I request that the above-named student be enagreement.	nrolled for thes	chool year subject to the	e terms of the school's enrollment/tuition
SIGNATURE (PARENT/GUARD) Please return this application form as	IAN)nd your check for \$50	00 payable to Acorr	date n KinderHouse.
Office use only: Check/Cash Chec	k No	Amount	Early Bird