

SGRPRC Childcare Registration Form

www.sgrprc.com

To register, please complete the form below. This form plus a **NON-REFUNDABLE** registration fee, and the 1st week's tuition payment are required.

Payments must be paid by check or money order.

Please submit registration form and payment to Spring Grove Rec. Center Childcare office.

PLEASE MAKE CHECKS PAYABLE TO: **SGRPRC**

Mailing Address: 50 North East St. Suite 1, Spring Grove, PA 17362

Phone Number: 225-9733

Fax: 225-9792



_____ **LITTLE TOTS**

Infant – 18 months

Cost: \$200 per week



_____ **EXPLORERS**

Approx. 2 – 3 Years

\$150 per week



_____ **ADVENTURERS**

4 – 5 Years

\$130 per week

Multi-child discounts available.

(Non- Refundable) \$35 Regis. Fee \$ _____ + Tuition \$ _____ = \$ _____ **TOTAL AMOUNT DUE**

**All weekly payments must be made by ACH. If not possible, contact Sandy, sandy_kreiner@sgrprc.com, Financial Officer.*
(Refer to Parent Handbook for further details.)*

SGRPRC is an Equal Opportunity facility. Employment, enrollment, program procedures, and practices are designed to prohibit discrimination based on the basis of race, color, religious creed, disabilities, ancestry, national origin (including limited English proficiency), age or sex. Enrollment and employment shall be provided for children with disabilities and reasonable accommodations shall be made to meet the physical or mental limitations of qualified applicants.

Child's Name _____ **Sex: M / F** **Birthdate:** _____

Address: _____ **Township/Borough:** _____

City, State, Zip: _____

Parent's Names: _____

Mother's Phone #: _____ **Father's Phone #:** _____

Email Address(es): _____ / _____

For more information and to receive the Registration Packet, contact the Childcare Director: **Megan Slothour**
Phone: 717-225-9733 x 4 **E-mail:** megan_slothour@sgrprc.com

_____ **OFFICE USE ONLY** _____