

BOUTIQUE PRESCHOOL & CHILDCARE CENTER
Rittenhouse Square, 1535 Locust Street, Philadelphia, PA 19102
www.rightstepseducation.com: 267.773.7588

## RIGHT STEPS ENROLLMENT APPLICATION

Child's Name	e:			Date of	Birth:	1	/
				Zip Co	de:		
Mother's Na	me:		· · · · · · · · · · · · · · · · · · ·				
Work Phone	e:		Home Pho	one:			
Father's Nam	ne:						
Work Phone	e:		Home Pho	one:			
Siblings:	Name:		<i>P</i>	\ge:			
	Name:		<i>P</i>	\ge:			
	Name:		A	\ge:	<del> </del>		
		SCHED	ULE REQUES	TED			
Full	Day (Drop off a	fter TIME, Pick up bef	fore TIME)				
Part	: Day (Drop of a	fter TIME, Pick up bej	fore TIME)				
Befo	ore School (Dro	off after TIME)					
Afte	er School (Arrive	s after school, Pick up	before TIME)				
Monday	Tuesday	Wednesday	Thursday	Friday			
Estimated Dr	rop off time:						
Estimated Pic	ck up time:		<del></del>				
l would like r	my child to begi	n:	<del></del>				
should be menrollment. agreement	nade out to R At the time detailing your	ight Steps of Ritte enrollment is offer child's enrollment	nhouse. You will ed, you will be t, tuition, and so	refundable \$150 re be contacted by R asked to sign a cor ecurity deposit info greement is signed a	light Stentract formation	eps to or serv o. You	confir ices/f child
		OFF	ICE USE ONL	Y	,	,	
Application r	eceived by:			Date: _	/	/	
ENROLLMEN	lT						
Ciassroom: _		FLUI TIME	I eacher:	REFORE SCH		-D CCI	