

Pea Pod Play Group

Parent – Child Playgroup Registration

7932 Avalos Way
Citrus Heights, Ca 95610
serenappod@gmail.com
916-838-0992



Class Session: (9:00am to 11:00am) Choose day: Tuesdays Wednesdays or Thursdays

Choose Session: February March April May 2014

Mother's / Guardian's Name _____

Father's / Guardian's Name _____

Home Address _____

Home Phone _____ Cell Phone _____ Email _____

CHILD'S FULL NAME: _____ **Age:** _____ **Birthday:** _____

Please list any health conditions and/or allergies including food allergies for each child:

Other Persons authorized to bring and participate with child(ren):

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

I understand that I am solely responsible for the care and supervision of my child(ren) at all times during participation in the PeaPod Playgroup Parent and Child program. I agree to not hold Serena Syn, or PeaPod Playgroup or any of it's associates responsible for any damages or injuries to person(s) or personal property incurred while on the premises.

Signature of Parent / Guardian _____ Date _____

PeaPod Playgroup Fee: \$100 for 4-week session \$25 per child per day and \$20 for sibling

Please make check Payable to Serena Syn, 7932 Avalos Way, Citrus Heights, CA 95610
Telephone: 916-838-0992 email: Serenappod@gmail.com

Amount Paid: _____ Date: _____ Check # _____ Cash
_____ Date: _____ Check # _____ Cash

Dates attended: _____

Dates CXL: _____ Dates Missed: _____