



# PARENT'S DAY OUT APPLICATION 2019-2020

A non-refundable \$30 registration fee must accompany this form.

CHILD'S NAME \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

PARENT 1 NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ OTHER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

PARENT 2 NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ OTHER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

### PROGRAM OPTIONS

\_\_\_\_\_ M/W/F 9:00-11:30

\_\_\_\_\_ T/TH 9:00-11:30

\_\_\_\_\_ M-F 9:00-11:30

PRIORITY STATUS (check any that apply)

- \_\_\_\_\_ NBCC Staff
- \_\_\_\_\_ NBCC Sibling
- \_\_\_\_\_ NBUMC Church Member
- \_\_\_\_\_ NBCC Alumni

- **Children must be 20 months old by September 1, 2019 to enroll in PDO.**

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

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### FOR OFFICE USE ONLY

Date Received \_\_\_\_\_

Registration fee \_\_\_\_\_

Received by \_\_\_\_\_

Days Enrolled \_\_\_\_\_

I/C \_\_\_\_\_



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