





MUSICAL PATHWAY'S FALL 2009 REGISTRATION FORM - WAUNAKEE

September 8th – January 15th

ENROLLMENT EASY AS 1-2-3

- 1) Enter 1st, 2nd, and 3rd Choices on Front and Complete Form on Back
 -Class Availability Limited - Filled on first come, first served basis – Minimum of 5 children needed to form a class.
 -NOTE: Complimentary Baby-sitting now available Tues & Thurs a.m. in nursery.
- 2) Send Form and a check for the **Registration Fee ONLY**, which reserves a place for your child in the class of your choice.
 -The registration fee is non-refundable as the home materials kits will be ordered upon receipt.
- 3) **Tuition** (Right Column) is due prior to your first class in the Fall. No add'l bill will be sent.
 -Early Bird Tuition \$ are listed for those families registering before August 20th.

CURRICULUM	AGE OF CHILD	CLASS LENGTH	SESSION LENGTH	*OFFERINGS/ LOCATIONS	**REG FEE	TUITION
	0-2 Yrs	45 minutes (parent/caregiver attends entire class) <i>Complimentary Baby Sitting Available Tues & Thurs am</i>	16-week Session	Tuesday 9:15 _____ Wednesday 9:15 _____ Wednesday 5:30 _____ Thursday 9:15 _____ Thursday 6:45pm _____ Friday 9:30 _____	\$72 Includes "2" Home Materials Kits Each kit contains: 1 CD, Baby's Home Journal PDF, 1 Instrument, Literature Book, 2 Art Banners, Weekly Information Forms	\$209 16 weeks <u>Early Bird</u> (\$196) \$12/wk
	2 - 4 yrs	45 minutes (parent/caregiver attends entire class) <i>Complimentary Baby Sitting Available Tues & Thurs am</i>	16 week session	Monday 9:30 _____ Tuesday 9:15 _____ Tuesday 10:20 _____ Tuesday 5:35 _____ Wednesday 9:15 _____ Wednesday 10:20 _____ Wednesday 5:35 _____ Wednesday 6:30 _____ Thursday 9:15 _____ Thursday 10:20 _____ Thursday 5:40 _____ Friday 10:10 _____	\$62 Includes Home Materials Kit: 2 Home CD's, 2 Zig-Zag Blocks, 2 Music & Movement Literature Books, Home Activity Book, Carry Bag Tote, Weekly Information Forms	\$209 16 weeks <u>Early Bird</u> (\$196) \$12/wk
	3 ½ - 5 yrs	45 minutes (parent/caregiver attends last 15 minutes) <i>Complimentary Baby Sitting Available Tues & Thurs am</i>	16 week session	Tuesday 8:10 _____ Tuesday 10:20 _____ Tuesday 4:20 _____ Tuesday 6:30 _____ Wednesday 9:15 _____ Wednesday 10:20 _____ Thursday 9:10 _____ Thursday 4:20 _____ Thursday 5:30 _____ Thursday 6:30 _____ Friday 9:00 _____	\$70 Includes Home Materials Kit* 2 Home CD's, 2 Lummi Rhythm Sticks, Slide Whistle Family Activity Bk, 2 Literature Books, Park Game Set, Weekly Information Forms *Backpack for newcomers	\$209 16 weeks <u>Early Bird</u> (\$196) \$12/wk
	Kinder- garten thru 1 st Grade 5-7 yrs	1 Hour (parent/caregiver attends last 10 minutes)	16 week session	<u>SEMESTER 1</u> Monday 4:15 _____ Monday 5:30 _____ Thursday 4:15 _____ Thursday 5:30 _____ <u>SEMESTER 3</u> Tuesday 4:15 _____ Tuesday 5:30 _____ Wednesday 4:15 _____	\$80* Includes CD, Home Activity Pages, Warm Up Activities, Music at Home Cards, Games & Games Bag, Rhythm Sticks, Manipulatives, YC1=Glockenspiel YC3 = Dulcimer	\$225 16 weeks <u>Early Bird</u> (\$212) \$13/wk

**Registration Fee + Tuition = TOTAL Cost.

PLEASE NOTE
PLEASE KEEP ALL OF YOUR CHOICES AVAILABLE
IN CASE YOUR 1ST CHOICE DOES NOT FORM OR CLASS IS FULL.

Please make checks payable to:
Musical Pathways Foundation 1908 Manchester Crossing Waunakee WI 53597

Questions? Contact Andrea Kaltenberg (608) 850-4854
or email: musicalpathways@charter.net

1st Child's Name _____ **Gender** _____ **Birth Date** _____

Please Check One Box:

Need Full Materials Need Sibling Kit Only I have ALL Materials (Present to Educator)

Curriculum Name: _____

2nd Child's Name _____ **Gender** _____ **Birth Date** _____

Please Check One Box:

Need Full Materials Need Sibling Kit Only I have ALL Materials (Present to Educator)

Curriculum Name: _____

3rd Child's Name _____ **Gender** _____ **Birth Date** _____

Please Check One Box:

Need Full Materials Need Sibling Kit Only I have ALL Materials (Present to Educator)

Curriculum Name: _____

How did you hear about us? _____

or

Check Box if Reenrolling

Please list any special needs or allergies of which we should be aware.

Parent's Name (s) _____

Phone (home) _____ **(work/who)** _____ **Email** _____

Street Address _____ **City** _____ **Zip** _____

Adult Attending Class if other than Parent _____

