



## SPRING 2016 PLAYGROUP APPLICATION

**The Co-op School** is pleased to offer a morning Playgroup. Children ages six months to two years old attend with a parent or caregiver to play with their peers. The Playgroup is a time for free-play -- age-appropriate toys, musical instruments, and art materials are supplied. Parents and caregivers are welcome to bring snacks and are expected to help set up and clean up activities.

The Playgroup takes place in our recreation room on the first floor of 87 Irving Place. The space is large enough to provide separate play areas for pre-walkers and walkers. You may join for two to five days a week per session.

The Playgroup meets from **9:00 a.m. - 10:30 a.m.** five days a week.

The cost of the Spring 2016 program is:

2 days a week = \$196

3 days a week = \$294

4 days a week = \$392

5 days a week = \$490

The Playgroup is organized by Co-op School Parent Coordinators, who are the contacts for joining the group. Co-op School Parent Monitors attend each session and oversee supplies and operation of each get together. Email [playgroup@thecoopschool.org](mailto:playgroup@thecoopschool.org) to reserve a spot or for questions.

The Spring Playgroup runs 14 weeks from January 11 to April 22, 2016. The playgroup will **not** run on days the Co-op School is closed and the whole week of mid-winter break (Jan. 18; Feb. 2; Feb. 15, 16, 17, 18, 19; March 16). We do not offer make-ups for missed sessions. Full program payment is required at the time of registration. Prorated refunds are available up to two weeks after the initial start date.

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

Parent's Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone 1 (\_\_\_\_\_) \_\_\_\_\_ Phone 2 (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Please enroll my child in the following days for playgroup:

\_\_\_ Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday = \_\_\_ Total # days

Please make checks payable to: **The Co-op School** \_\_\_\_\_ Total cost

I agree that I or my designated childcare provider \_\_\_\_\_ will accompany my child/children and be physically present at playgroup. I acknowledge that The Co-op School is not responsible for any injury, loss or damage, to me, my child/children or personal property in its facilities.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_