



HOME SCHOOL PROGRAMS

Registration Form

Child's Name: _____ Parent Name _____

Mailing Address: _____

City: _____ Zip: _____

Phone: (_____) _____ Email: _____

Does your child you have any special needs ? : Yes No If yes, please explain:

Age of Child _____

Number of Students _____ x \$10.00 x _____ number of programs Total _____

(Fee is required for all children who participate in or join the program)

Charter School Voucher program (name) _____

Name of Teacher (education Specialist) etc: _____

Contact Number _____

Date request submitted to school district _____

Programs Dates _____, _____, _____,
_____, _____

Registration is required.

Fees are due in full on day of program.

Cancellation less than 10 days prior to the program or No Shows are expected to pay the program fee.

Day of program arrivals will be charged \$15.00 per child if space is available.

Parents are welcome to drop off their child(s) and return at end of program. He/she may join the student(s) during the program, however if younger siblings are present the parent is responsible for ensuring they do not disturb the program. A Nature Play area is available

I acknowledge that my program is not confirmed until I receive written confirmation.
Programs are delivered rain or shine.

Parent Signature: _____

Questions? Please call (530) 878-6053 or email: programs@PlacerNatureCenter.org