



**TUCSON  
WALDORF  
SCHOOL**

3349 E. Presidio Road  
Tucson, Arizona 85716

Date Received _____
Deposit _____
Balance _____
Re-enroll/Session _____
_____
_____
_____
_____

**PARENT-CHILD PLAYGROUP CLASS ENROLLMENT**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

**Current School Year** \_\_\_\_\_ **Age** \_\_\_\_\_

**Playgroup Session** \_\_\_\_\_

**Day/Time:** First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Siblings and their ages \_\_\_\_\_

Food preferences \_\_\_\_\_

Food allergies \_\_\_\_\_

Other allergies \_\_\_\_\_

What are the child's favorite activities? \_\_\_\_\_

\_\_\_\_\_

What do you want to get out of this group experience? \_\_\_\_\_

\_\_\_\_\_

How did you hear about our Parent-Child classes? \_\_\_\_\_

\_\_\_\_\_