



## 2020-2021 RAINBOW CORNER TODDLER DEVELOPMENTAL PLAYGROUP

*Accepting registration for children 24 to 42 months*

- Monday Session Only (1 time per week) 8:30am-10:30am or  Friday Session Only (1 time per week) 8:30am-10:30am (\$45.00 per month)
- Monday and Friday Sessions (2 times per week) 8:30am — 10:30am (\$80.00 per month)

**\$10.00 NON-REFUNDABLE REGISTRATION FEE DUE WITH REGISTRATION FORM.**  
*Make checks payable to CARE for Children.*

Check #/Cash \_\_\_\_\_ Date Paid \_\_\_\_\_ Received by \_\_\_\_\_

The developmental playgroups are staffed by a licensed early childhood educator and teacher's aide.

**The playgroup encourages the development of:**

**Social & Sensory Skills & Language**

Children learn through playing. Social skills are promoted through structured play, and by reinforcing self-help skills and manners. Playgroup focuses on the five senses to introduce toddlers to methods of exploring the world around them and expanding their view of how things work. Playgroup participants have the opportunity to acquire new and practice existing language skills. The playgroup staff encourages social interaction, and works to enhance language development and further creativity in a language rich environment.

Child's Name	Date of Birth	<i>Please circle: Male or Female</i>
Address		
Primary Phone #	Secondary Phone #	

Mother's Name/Legal Guardian		
Address		
Primary Phone # <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	Secondary Phone # <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	e-mail address

Father's Name/Legal Guardian		
Address		
Primary Phone # <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	Secondary Phone # <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	e-mail address

How did you hear about our program?

**Other Documentation Needed:**

**Contact/Medical Information**       **Consent Form**       **Current Immunization Record**

Signature of Parent/Legal Guardian

Date

