

Sibling Discounts Available for more than one child enrolled.

Classtimes are subject to change or cancellation due to enrollment size.

Please make check payable to:

Laura Beckman

709 N. Sunset Dr Olathe KS 66061

Parent Name(s) _____

Caregiver's Name(if participating in class) _____

Full Mailing Address

Hm. Phone _____

Wk. or Cell _____

E-mail Address _____

Child's Name _____

Date of Birth _____ Age _____

Please Circle 1st Class Choice:

Our Time Tuesday 6PM

Our Time Wednesday 10 AM

Our Time Thursday 10 AM

Our Time Thursday 6:45 PM

First names and ages of siblings

Please include any additional information about you or your child that will help me best meet your needs

_____ I have read and understand all Kindermusik policies

Initials (including cancellation policy)

I'm so glad you chose Kindermusik for your child!

**Your enrollment will be confirmed with a welcome letter and/or an e-mail
within two weeks.**