

**CELEBRATION EXPLORATION ZONE**  
**APPLICATION FORM - 4's/5's**  
**2025-2026**

CHILD'S NAME \_\_\_\_\_

NAME YOU WOULD LIKE YOUR CHILD TO BE CALLED AT SCHOOL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ Male Female (please circle)

Parent/Guardian #1 Name \_\_\_\_\_

Parent/Guardian #1 Address \_\_\_\_\_

Parent/Guardian #1 Phone \_\_\_\_\_

Parent/Guardian #1 Email \_\_\_\_\_

Parent/Guardian #2 Name \_\_\_\_\_

Parent/Guardian #2 Address \_\_\_\_\_

Parent/Guardian #2 Phone \_\_\_\_\_

Parent/Guardian #2 Email \_\_\_\_\_

**CELEBRATION EXPLORATION ZONE**

Please check your option and indicate which days you will attend

☐ 1 day per week - \$100 per month \_\_\_\_\_

☐ 2 days per week - \$200 per month \_\_\_\_\_

☐ 3 days per week - \$300 per month \_\_\_\_\_

☐ 4 days per week - \$400 per month \_\_\_\_\_

☐ 5 days per week - \$500 per month \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

