NORWALK PUBLIC SCHOOLS
AFTER THE BELL

CHANGE OF ENROLLMENT FORM (circle school location)
Brookside    Cranbury     Jefferson     Kendall     Marvin     Rowayton     Silvermine     Tracey     Wolfpit

1) **General Information:**
Child’s Last Name: __________________________
Child’s First Name: __________________________
Grade: __________________________
Home Phone #: __________________________
Street Address: __________________________
Zip Code: __________________________
Child’s Birth date: __________________________
Child’s Age: __________________________
Child’s Sex (M or F): __________________________
Child lives with (check one):
Both Parents _____
Mother _____
Father _____
Grandparent(s) _____
Other (please list): __________________________
Parent or Guardian Last Name: __________________________
Parent or Guardian First Name: __________________________
Address if different from child’s: __________________________
Home Phone #: __________________________
Cell Phone #: __________________________
Work Phone #: __________________________
Email Address: __________________________

2) **Previous Enrollment:**
☐ Morning
☐ Afternoon
☐ Both AM & PM
☐ Every day; OR
☐ Monday
☐ Tuesday
☐ Wednesday
☐ Thursday
☐ Friday

3) **New Enrollment**
☐ Morning
☐ Afternoon
☐ Both AM & PM
☐ Every day; OR
☐ Monday
☐ Tuesday
☐ Wednesday
☐ Thursday
☐ Friday

10) **I / We will be responsible for paying the monthly fees for the program.**

Signed by Parent/Guardian: __________________________
Date: __________________________

Internal Use Only
Date of New Enrollment: __________________________

New Days: M ____ T ____ W ____ Th ____ F ____
AM ____ PM ____ Red ____ Free ____

New Monthly Fee: __________________________
Old Monthly Fee: __________________________
Amount Due (or) Credit for Next Month:

Signed by Parent/Guardian: __________________________
Date: __________________________

Revised 5/21/19