

REGISTRATION FOR MOTHERS MORNING OUT

Child's Name _____

Birthdate _____

Parent(s) Name _____

Address _____

Email Address _____

Telephone Number _____

Date Requested – Circle days of the week, in any combination

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

To register your child, please submit this form, along with your check, made out to Mothers Morning Out, for \$25. This registration fee is non-refundable (unless you move out of the area).

2010 - 2011 Rates:

1 day per week \$42.00 per month

2 days per week \$84.00 per month

3 days per week \$126.00 per month

Additional days, if available.

Please return to:
Clemson United Methodist Church
Attn: MMO
300 Frontage Road, PO Box 590,
Clemson SC 29633