

Sandwich Partnership for Families Discovery Center PLAYGROUP REGISTRATION FORM

Name: Address: City, State, Zip:				Little by little, Day by day, Friends and flowers Grow that way.				
					Phone Number:			
					Email: Grow that way. Best Cell Phone # to receive Text Messages for changes or reminders:			
best C	eli Phone # to	receive Text Wiessa	ages for changes or reminders:					
Childr	en:							
	NAME	AGE	BIRTHDATE	MALE/FEMALE				
1.								
2.								
3								
4								
<u>OR</u>	Thu	n: from 10-11: urs: from 9:30-		nsis.				
	•	y riayg. cape iiii re	·					
Allerg								
May w	e use your ch	ild's photo in Sandw	vich Partnership program mate	rials?				
Comm	ents:							

For any questions or concerns, please feel free to contact the Sandwich Partnership Director Lauren Melillo at 508-477-6600, ext. 132 or or lmelillo@sandwich.k12.ma.us