

# R-P ECFE Registration Form

**Fees now include classes PLUS all special events!**

Child's name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2nd Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Full Session (5 Classes + Special Event)**

*Sliding Fee Scale based on annual income:*

\$0-30,000: **\$12** for the session per family

\$30,000-43,000: **\$18** for the session per family

\$43,000 + : **\$25** for the session per family

**Full Year (5 Sessions=25 Classes + ALL Special Events)**

*Sliding Fee Scale based on annual income:*

\$0-30,000: **\$55** for the year per family

\$30,000-43,000: **\$80** for the year per family

\$43,000 + : **\$110** for the year per family

**Please select class section**

**Class/Session:**

Thursday Evening, 6:00-7:15 P.M. \_\_\_\_\_

Friday Morning, 8:15 - 9:30 A.M. \_\_\_\_\_

**Learn & Play Classes Only, 4:00 - 5:15 P.M. \_\_\_\_\_**

**Full Year (all sessions/events):**

Thursday Evening, 6:00-7:15 P.M. \_\_\_\_\_

Friday Morning, 8:15 - 9:30 A.M. \_\_\_\_\_

*Or Choose Individual Class(es):*

**If coming to individual, classes Please indicate  
which dates you will be attending:**

*Please complete and send with payment to:*

**R-P ECFE**

**P.O. Box 627**

**Rushford, MN 55971**

I give permission for my child's participation in the R-P Community Ed programs including ECFE. I do not object to my child's photo being taken while in classes and being used in publications or in social media (i.e. Facebook).

(Check here if objection \_\_\_\_\_)

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_