

50 Dunham Ridge Rd, Beverly 1 Scott's Way, Essex 225 Maple St, Middleton 16 River St, Middleton 185 Lynn St, Peabody 17 Mill St, South Hamilton 50A Audubon Rd, Wakefield

Today's Date: \_\_\_\_\_

### ENROLLMENT REQUEST FORM

\*THIS FORM IS FOR FAMILIES CURRENTLY ENROLLED AT MAGICAL BEGINNINGS ONLY.

School Location: \_\_\_\_\_

Parent's Name: \_\_\_\_\_\_

Phone #: \_\_\_\_\_

Email:

New Child's Name: DOB or Due Date:

Name of Currently Enrolled Child:

## ENROLLMENT REQUEST

PLEASE NOTE: New enrollment requests are <u>NOT guaranteed</u> and must be reviewed by the enrollment team. Enrollment and waitlist priority is given to families with children currently enrolled at Magical Beginnings. Once enrollment is approved and registration form and deposit are submitted, child will be officially enrolled. Billing will begin on child's enrollment start date. Clients who enroll unborn children are allowed a 30-day window from their enrollment start date to begin the program. 4 weeks written notice must be given if an infant start date will differ from the enrollment start date. All deposits are NON-REFUNDABLE.

#### Preferred Enrollment Start Date: \_\_\_\_\_

#### **Preferred Schedule**

	Arrival	Pick Up
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

If your preferred schedule is not available, would you like to be added to our waitlist? Yes No

## Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Please submit this form to info@magicalbeginningslc.com

OFFICE USE ONLY				
Schedule Change Request	Approved	Partial Approval	Denied	
NOTES:				
Parent/Guardian (initial partial approval):		Date:		
Director's Signature:		Date:		