

# Mommy & Me

**MOMMY & ME CLASSES**  
**November 3, 2021 - June 2022**  
**26 Weeks**



**Wednesdays, 9:30 to 10:30 a.m.**  
**The fee is \$300 for the entire 26 weeks**

**Mommy & Me Classes are for children from 9 months to 21 months old**

**Our Mommy & Me Classes are designed so that you and your child will have fun together in an educational and stimulating environment. The program gives your child the opportunity to socialize with peers and while allowing you the opportunity to share and grow with other moms. Classes will include songs, crafts, movement, story time and prayer time.**

Payment is required at the time of registration in order to hold your spot.

## **PLEASE NOTE:**

**For safety reasons, class size is limited.**  
**Registration is on a first come, first served basis.**  
**Please send in the registration form with your tuition in order to hold a spot in a Mommy & Me Class.**

**\*\*Masks are mandatory for the adult participants, regardless of vaccination status.**

Office Use:

Date Tuition Received: \_\_\_\_\_

Ch. # \_\_\_\_\_ Cash: \_\_\_\_\_

ST. LUKE PRESCHOOL & EARLY CHILDHOOD CENTER

20 Candlewood Path  
Dix Hills, NY 11746  
631-462-5216

www.stlukedixhills.org  
MOMMY & ME CLASSES

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Child's Full Name: \_\_\_\_\_  
Last First

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Cell Phone # (\_\_\_\_) \_\_\_\_\_ Mother's Work Phone # (\_\_\_\_) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone # (\_\_\_\_) \_\_\_\_\_ Work Phone # (\_\_\_\_) \_\_\_\_\_

Does your child have any allergies or medical conditions we need to be aware of? \_\_\_\_\_

Church Affiliation: (If Any) \_\_\_\_\_

How did you hear about St. Luke Preschool? \_\_\_\_\_

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

I give my permission to have both mine and/or my child's picture taken during class time, which may be used for publicity by the preschool.

Parent Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_