



Registration Form for Mommy and Me Program Fall 2025

Name of Child _____ Date of Birth _____ Sex M F

Address _____ Zip _____

Parent 1 Name _____ Parent 2 Name _____

Email address _____

Phone Number (cell) _____

8 sessions, \$200

Program will run on the following Mondays from 10:30 to 11:30:

10/20, 10/27, 11/3, 11/10, 11/17, 11/24, 12/1, 12/8

Please return this form along with your payment to KPCELC or mail to:

Katonah Playcare ELC

PO Box 340

Katonah, NY 10536

parent signature

date

*Please note that we need a minimum number of children to run the program.

*No refunds of fees will be made for withdrawal or absences.