

Interest Form - Panther Cubs, Panther Pals & Cool School

This form does not guarantee you a spot. We will notify you when a start date has been determined. (Available spots are filled based on date form is received.)

Jennie Barker SACC Director (507)-272-7140

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Child's name _____ Todays Date ___/___/20__

DOB _____ school year start/ed kindergarten _____

Mother's Names _____ Fathers Name _____

Phone Number _____

Email Address _____

Mailing address _____

Siblings _____

- **What program you would like to have your child to attend? Please Circle one.**
Panther cubs (ages 3-5) Panthers Pals (K- 1stgrade) Cool School (2nd grade & up)

If a spot does not open up for your child in the program you circled above, would you like us to keep them on the waiting list for their age group? Yes or No

- **Are you looking for care during the**
School year summer both
- **What would the times of care needed look like on an average week (Monday-Friday 6am-6pm)**
Monday Wednesday Friday
Tuesday Thursday Example: 7-8am and 3-5pm
- **What date would you need care to start?** ___/___/20__
- **Other information you'd like to share?**

Office Use Only

Date received _____ Contacted _____
available _____ confirmed _____
_____ year _____