



Elephant Thoughts

Education for a changing world

Student Information

First Name: _____ Last name: _____

Date Of Birth: _____ Health Card # _____

Address: _____

Enrollment

We encourage weekly attendance so that children can see the full benefits of a 'Forest School' program. If this is currently not a possibility, please choose weekly or monthly attendance. If there is another enrollment option you are looking for, please be in touch with our staff to discuss. Promotion - Register your child weekly or biweekly for the year and your first session will be free.

Please select from the following enrollment options by checking ONE of the boxes in each category:

Day/Group: Monday Tuesday Wednesday Thursday Friday
 8-14 4,5 6, 7, 8 6, 7, 8 8-14

Frequency: Weekly Bi-Weekly Monthly

The following start dates will go ahead with a minimum attendance of 6 (full time/weekly) students registered:

Mondays, (Nov 4th) Tuesdays (Oct 1st) Wednesdays (Oct 9th) Thursdays (Nov 7th) Fridays (Oct 11th)

Please indicate when your child will begin attending our program.

Start Date: _____

Cost is \$60 per day. Please pay a deposit of \$120 to register your child. You can pay by Credit Card, Paypal, Cheque or Cash. Tuition can be paid yearly or installments in Sept, Jan, May.

Please indicate how you will pay: Yearly Installments

Please send your completed registration form to Mysti: mysti@elephantthoughts.com or call 705-444-2012 and speak with a staff member. If you have any other questions about the program or curriculum please contact the Principal of our 'School in Nature', Erik Koopman: erik@elephantthoughts.com or 705-309-8258



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Contact Information

Parent/Guardian

First Name: _____ Last Name: _____

Relationship: _____ Phone: _____

Alternate phone: _____

Email: _____

Parent/Guardian

First Name: _____ Last Name: _____

Relationship: _____ Phone: _____

Alternate phone: _____

Email: _____

In Case of Emergency:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Authorized Pick Up Information

First Name: _____ Last Name: _____

Phone: _____ Alternate Phone: _____

First Name: _____ Last Name: _____

Phone: _____ Alternate Phone: _____