Play Centers, Inc. / Play and Learn

"Your First Choice for Quality Child Care and Education"
in Anne Arundel County, Baltimore City,
and Baltimore County

SCHOOL-AGE EMAIL REQUEST FORM

In an effort to keep our Play Centers' families informed regarding monthly center newsletters/calendars, staff updates, center events, etc., Play Centers, Inc. would like to have at least 1 (one) Email address on file for each of our Play Centers' families.

With this in mind, please take a moment to complete this form and return it along with your enrollment packet to the Director. Please feel free to provide more than 1 Email address.

Child #1's Printed Full Name: _____ Center Location: _____

Child #2's Printed Full Name: _____ Center Location: _____

Child #3's Printed Full Name: _____ Center Location: _____

Parent/Guardian #1: ***(Please print carefully and legibly!)***

Full Name: _____

Work Email Address: ***(1 letter, number, or symbol per box.)***

Personal Email Address: ***(1 letter, number, or symbol per box.)***

Parent/Guardian #2: ***(Please print carefully and legibly!)***

Full Name: _____

Work Email Address: ***(1 letter, number, or symbol per box.)***

Personal Email Address: ***(1 letter, number, or symbol per box.)***

Please keep in mind that it will be the responsibility of each family to keep Play Centers, Inc. updated as to changes or deletions of the Email address(es) you provide. Please note that Play Centers, Inc. is not responsible for any fees associated with the Email address(es) provided.

We sincerely appreciate your assistance with this matter and look forward to utilizing several forms of communication to keep our Play Centers' families informed of company-wide as well as center-related news and events!

If you have any questions or concerns, please feel free to contact the Director.

Thank you for making Play Centers, Inc. "Your 1st Choice for Quality Child Care and Education!"

ADMINISTRATIVE USE ONLY
This form is to be sent to the School-Age AR Coordinator on the day it is received by the Director!
School-Age AR Coordinator Signature: _____ Date: ___/___/___