

Wiggles & Giggles:

Fitness for Preschoolers

Movement
Pathways
Object Control

Balance
Space
Nutrition

Confidence
Flexibility
Fun

Maintain & control body in place or moving
Develop in a logical manner based on child's own experience
Allows for better performance of certain motor skills & enjoyment of movement

Children can develop basic competency in fundamental motor skills for games, sports,
& lifetime physical activity

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Wiggles & Giggles Registration – page 1

Available Classes:

___Monday ___Friday

- Classes follow Circle of Friends Preschool calendar
- Policies & Procedures for Fees & Prompt Pick Up are the same as Circle of Friends Preschool
- Space is limited & based on a first come ~first served basis.
- Children who attend AM Preschool –
Wiggles Instructor picks child up from preschool class at 11:20.
Parent picks child up in the gym at 12:15.
- Children who attend PM Preschool –
Parent drops child off in gym at 11:35. *Please take child to bathroom & wash hands before dropping off at gym.*
Wiggles Instructor takes child to preschool class at 12:30.

- What your child needs for class:
~Appropriate & safe attire/shoes for gym play.
~Water bottle “*easy pop up spout*”
~Light, healthy “*nibbles*” are encouraged.
(No Nut products please!)
- Prorated Tuition is due by the 7th of each month (*Oct–May*).
Monday - \$38
Friday - \$38
(If your child must withdraw your tuition balance will be billed or refunded based on sessions held at time of withdrawal notification to instructor)
- If paying in full (*Oct–May*) a \$10.00 discount is given.
Monday or Friday \$304 - \$10 = **\$294**
(If your child must withdraw your tuition balance will be refunded based on sessions held at time of withdrawal notification to instructor)
- Mid year enrollments \$12 / session
- Please make checks payable to “**Wiggles & Giggles**”.
Place in Circle of Friends tuition box

Child's Name

Parent or Guardian

Address

City, State, Zip

Home Phone

E-mail

Cell Phone

**Complete both sides &
Return to Circle of Friends Preschool**

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Mary Kent, Fitness Program Director
Text / Tel: 360.907.8908

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Wiggles & Giggles Registration – page 2

Medical Release

I (We) the undersigned, parent or legal guardian of _____,
a minor, do hereby authorize and consent for Wiggles & Giggles: Fitness for Preschoolers to seek medical treatment deemed necessary in the event of an emergency, accident or sudden illness. Every attempt will be made to immediately make contact with a parent.

I (We) will assume any expense incurred by such treatment.

Doctor preferred _____ Phone _____

Hospital preferred _____ Phone _____

Insurance Company _____ Policy Holder _____

Policy Number _____ Group Number _____

I (We) do not hold the above named, or Wiggles & Giggles: Fitness for Preschoolers responsible or liable for any action necessary in the emergency care of my (our) child.

Signature _____

Date _____

Please list all allergies, medical concerns or physical limitations:

Complete both sides
And
Return to Circle of Friends Preschool