



# Little Sunshine Class

A mommy and me group with Ms. Gina

Children Ages 12-24 months  
Every Friday @ 9:30-10:30 am

6 week session

begins Friday, September 13, 2019

\$150 for 6 weeks

Join us as we bond and explore with our little ones.

Our Little Sunshine class will include:

\*circle time \*music & movement \*story time \*play time \*art

This is a great opportunity to meet local families and explore in a classroom setting that will help prepare your little one for preschool.

We can't wait to meet you!

Class Location: Peninsula Community Church Preschool  
5640 Crestridge Rd, Rancho Palos Verdes, CA 90275  
Office 310-377-4391

Return attached Registration Form to the preschool office  
or email Registration to: [Christie@pccpv.org](mailto:Christie@pccpv.org)

Any Questions?

Ask our teacher, Gina Crosthwaith!  
[gcrosthwaith@gmail.com](mailto:gcrosthwaith@gmail.com)

Class Dates:

Sept 13<sup>th</sup>    Oct. 4<sup>th</sup>  
Sept 20<sup>th</sup>    Oct. 11<sup>th</sup>  
Sept 27<sup>th</sup>    Oct. 18<sup>th</sup>





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## Registration Form

Print Child's First Name \_\_\_\_\_ Print Child's Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Age \_\_\_\_\_ M/F \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Language spoken at home: \_\_\_\_\_ Does child speak English? \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Allergies: \_\_\_\_\_ Health Issues we need to be aware of: \_\_\_\_\_

Yes  No  I give permission for my child to be photographed & pictures used on web site, newsletter & bulletin board.

I understand that there are no refunds for absences, and that each week is subject to cancellation should enrollment not be adequate.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

TUITION PAID \$ \_\_\_\_\_

Payment type \_\_\_\_\_ Check # \_\_\_\_\_ Date Paid \_\_\_\_\_