



LEARN-n-GROW

Early Childhood Education Center

Wrap Around Registration Form

2024-2025 School Year

Child's Name _____

Date of Birth _____

Parent's Name _____

Phone # _____

Please fill the times and days needed:

	Monday	Tuesday	Wednesday	Thursday	Friday
Arrival Time					
Pick-up Time					

Wrap Around Payment Policy

I understand that I will be billed bi-weekly and failure to pay by the due date will result in a \$30 late fee. I also understand that failure to pay in full in a timely manner will result in removal from the wrap around program.

Payment Options:

- Pay online at www.myprocare.com
- Pay at the Early Childhood Center, make checks and money orders out to Otsego Public Schools, receipt will be issued. Office hours are 7:30am-3:30pm
- Mail in your payment (allow extra time so we will receive your payment on time) at:
Otsego Community Education
400 Sherwood Street
Otsego, MI 49078

Parent Signature: _____ Date: _____