**Tour Requested and Pre- Enrollment Questionnaire Date: \_\_\_\_\_\_\_**

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Age: \_\_\_\_\_\_\_\_\_\_\_\_\_

Requested Start Date: \_\_\_\_\_\_\_\_\_\_\_

Does your Child (ren) need reasonable accommodations? \_\_\_YES \_\_\_NO

Please specify:

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I have Care 4 Kids: \_\_\_No \_\_\_Yes

Additional Information you would like to share: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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