

For Office Use:

\_\_\_\_\_ Background check returned  
\_\_\_\_\_ Background check completed



Academic Year \_\_\_\_ 2018 – 19  
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### MINI MEERKATS ENROLLMENT FORM

Student's Full Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City/State Zip

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

School presently attending or last attended: \_\_\_\_\_

School District currently living in: \_\_\_\_\_

Does your child have any dietary restrictions or allergies? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

CLASS SCHEDULE – Friday's 930-1130am
September – 7____, 14____, 21____, 28____
October – 5____, 12____, 26____
November – 2____, 9____, 16____, 30____
January – 11____, 18____, 25____
February – 1____, 8____, 15____, 22____
March – 1____, 8____, 22____
April – 5____, 12____, 19____, 26____
May – 3____, 10____

