



Special Needs Schools of Gwinnett
2010 "Great Beginnings" Registration
(Preschool children ages 24 months to 4 years/Pre-K)

Child's Name: _____
Birthdate: _____ Age (as of June 1st): _____
Parents: _____
Phone # (h) _____
(w) _____
(cell) _____
e-mail: _____
Address: _____
City/State/Zip: _____

Please enroll my preschool child (who is between the ages of 24 months and 4 years) in the following camp weeks:

WEEK #1: June 14th -18th _____
WEEK #2: June 21st – 25th _____
WEEK #3: June 28th – July 2nd _____
WEEK #4: July 12th -16th _____
WEEK #5: July 19th – 23rd _____

Hours: *9:30 am – 1:30 pm (*new hours*)
Days: *Monday through Friday (*more days*)
Cost: *\$150 per week
plus a one time **\$50 registration & supply fee**

. *Returning SNS students pay discounted rate of \$75 per week and the \$50 camp registration and supply fee.

SPACE IS very LIMITED- Send registration form & \$50 ASAP to:
SNS, 660 Davis Road, Lawrenceville, GA 30046 Phone: 678-442-6262
email: snsfgwinnett@bellsouth.net