



E kākau maiāu (Please Print Clearly)

Inoa Hope (Last Name)	Inoa Mua (First Name)	Inoa Waena (Middle Name)
Helu Wahi (Street Address)		
Ahupua'a (City)	Moku'āina (State)	Helu Ahupua'a (Zipcode)
Helu Kelepona (Telephone Number)	Leka Uila (Email Address)	

Ka 'Ōlelo Hawai'i & Papa 'Ōlelo Hawai'i (Hawaiian Experience / Courses)

Hō'ike o ke keiki (Child Information)		
Inoa Hope (Last Name)	Inoa Mua (First Name)	Inoa Waena (Middle Name)
Helu Wahi (Street Address)		
Ahupua'a (City)	Moku'āina (State)	Helu Ahupua'a (Zipcode)
'Ehia ona makahiki? (How old is she/he?) (yrs/mo)	Lā Hānau (Birthdate) (MM/DD/YY)	
He mau 'ano ma'i, paheu kona? (Any Allergies?)		

'O ke ka'ina hea kou makemake? (Which schedule would you prefer for your child?)				
	Hele Piha (Full Time)	M-F	8:00 a.m.-4:00 p.m.	\$1300 Pēpē (Infant) \$1100 Kamali'i (Toddler)
	*Hele Hapa (Part Time)	M,W	8:00 a.m.-4:00 p.m.	\$650 Pēpē (Infant) \$550 Kamali'i (Toddler)
	*Hele Hapa (Part Time)	T, Th	8:00 a.m. – 4:00 p.m.	\$650 Pēpē (Infant) \$550 Kamali'i (Toddler)
	**Early Drop Off	M-F	7:00 a.m. - 8:00 a.m.	\$100/ month
	**Late Pick Up	M-F	4:00 p.m. - 5:00 p.m.	\$100 / month

*Limited Availability, dependent on overall enrollment and prioritized for WCC students.

**Limited Availability, dependent on staffing.

Disclaimer and Signature	
Ke pūlima 'ae au i nā mea a pau ma kēia palapala noi komo nei. (I certify that the information provided on this form is true and complete to the best of my knowledge.)	
Pūlima (Signature)	Helu o ka lā (Date)