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## Send this form directly to school with your child.

It is your responsibility to notify your child's classroom teacher of his/her enrollment with My Place at Watkins Glen. This form is provided for your convenience to notify the teacher to dismiss your child directly to our program.

To: Classroom Teacher

Regarding: My Place at Watkins Glen- Notice of Enrollment

My child \_\_\_\_\_ will be attending My Place at  
Watkins Glen the following days:

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

AM:     Monday    Tuesday    Wednesday     Thursday    Friday

PM:     Monday    Tuesday    Wednesday     Thursday    Friday

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent Contact Number)