



307 N 3rd Street D1, Philadelphia, PA 19106
 Email: karenwerme@bookwormselc.com
 Karen Werme, Owner/Director
 Phone: 267.273.1941

Application

Child's Name _____ Birth date _____

Address _____ Zip Code _____

Parent Information

Name
Home Address
Work Address
Home Phone
Cell Phone
Work Phone
Email

Parent Information

Name
Home Address
Work Address
Home Phone
Cell Phone
Work Phone
Email

Check desired schedule:

12 months – 2 years
☐ 3 Full Days 8am-6pm ☐ 4 Days 8am-6pm ☐ Full Time 5 Days 8am – 6pm
 2 years – 3.5 years
☐ 3 Full Days 8am-6pm ☐ 4 Days 8am-6pm ☐ Full Time 5 Days 8am – 6pm
 3.5 years – 5 years
☐ 3 Full Days 8am-6pm ☐ 4 Days 8am-6pm ☐ Full Time 5 Days 8am – 6pm

Preferred Date of Admission: _____

Signature _____ Date: _____

Please return with \$100.00 non-refundable processing fee.

Use the back to tell us briefly about your child and your family.