

## **Application for Enrollment**

Today's date:	Desired start date:			
Child's Full Name:				_
Birth Date:				
Home Address				
City	State	Zip C	ode	_
Parent/Guardian 1:				
Full Name				
Relationship				
Home Address (if different)				
Home Phone	Cell			
Work Phone				
E-Mail Address				
Parent/Guardian 2:				
Full Name				
Relationship				
Home Address (if different)				
Home Phone	Cell			
Work Phone				
E-Mail Address				
Sibling Information (please list a	ıll siblings under 6 yea	ars old):		
Sibling Name		_ Age		
Sibling Name		_ Age		
Sibling Name		Ane		

## Please indicate the program for which you are applying: Toddler (18 months to 36 months) Program □ 8:30 AM to 12:30 PM (5 Days) □ 8:30 AM to 12:30 PM (3 Days) □ 8:30 AM to 3:00 PM (5 Days) ☐ 8:30 AM to 3:00 PM (3 Days) Primary (2.5 years to 6 years) Program □ 8:30 AM to 12:30 PM (5 Days) ☐ 8:30 AM to 12:30 PM (3 Days) □ 8:30 AM to 3:00 PM (5 Days) ☐ 8:30 AM to 3:00 PM (3 Days) Extended Care (for either Toddler or Primary) ☐ AM Care (7:00 – 8:30 AM) ☐ PM Care (3:00 – 6:00 PM) ☐ Both AM and PM care Required Fees: New Student Registration and Material Fees (non-refundable) initial \_\_\_\_ Toddler and Preschool \$250.00 Kindergarten \$350.00 Activity Fee \$100 Waiting List Fee: \$250.00 (non-refundable) initial \_\_\_\_ (Shall be applied to registration fee upon enrollment) Tuition Deposit (one month tuition) (non-refundable) initial \_\_\_\_\_ (Shall be applied to the **last month tuition**) The required fees are due before your child's initial enrollment. Monthly tuition is due the 1st of the month. A \$50 late charge is applied to payments received five (5) days after the due date. FOR OFFICE USE ONLY Form of Payment: \_\_\_\_\_ Amount Rec'd: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ Rec'd by: \_\_\_\_\_ Form of Payment: \_\_\_\_\_ Amount Rec'd: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ Rec'd by: \_\_\_\_\_ Confirmed Start Date: \_\_\_\_\_ Classroom: \_\_\_\_\_ ☐ Collect Deposit and provide Deposit Receipt ☐ Procare account and record deposit