

## **Child Care & Learning Center**

## **REGISTRATION FORM**

## (Preschool, Pre-K & After School Programs)

## 2018 - 2019

Child's Name:		Date:				
(First)	(MI)		ast)			
Sex: Date of	Birth:	Н	Home Phone:			
	(mm / dd	/ уууу)				
Home Address:						
City:	State		Zip:			
,			·			
			_ Cell Phone:			
(First)	(	Last)				
Work Address:			Phone:			
Mother's Name:			_ Cell Phone:			
Work Address:	ess:Phone:					
Email: (Father)		(Mother) _				
Siblings: Name:		Age:	School:			
Class:	Half Day	Full Day	Extended Care			
Pre-School (3Yrs. +)	8:30 – 12:30	8:30 – 3:15	3:15 – 6:30			
Pre-K (4 Yrs. + )	8:30 - 12:30	8:30 – 3:15	3:15 – 6:30			
Kindergarten (5Yrs. +)	NA	8:30 – 3:15	3:15 – 6:30			
Note: Early drop off avai	lable from 7:30 am	. & 8:00 am.				
Nonrefundable Reg. fe	ee – \$50.00 Check	< # / C	Cash Date:	_		
Deposit: Nonrefundab	le June 2019 Insta	<b>illment.</b> Check#_	Date:			

Note: Please ensure t	o bring two separate chec	cks for reg.	fee and dep	oosit along with	I
completed form. Ad	mission will be on first com	e first serve	basis.		
How did you know al	pout the center?				
Has your child been i	n any Center / care before	eș NO:_	YES: _		
If yes, name of the fa	cility:				
Why do you prefer <b>LI</b> I	L' BIG ONES?				
What would you like	us to know about your chil	qś.			
		More	Less	None	
Separation anxiety	Yes / No	1	2	3	
Temperament	Adjusting / Takes Time	1	2	3	
Learning Style	Quick / Normal	1	2	3	
Expectations about y	our child's achievements	(Short term	and long te	rm)	
Received "Manual of Op	erations" for the current acade	mic year.			
·		·			
Parents Signature: 1.	2.				