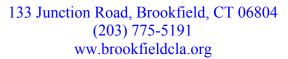
# Little Blessings Childcare Center



July 1, 2018 - June 30th, 2019

Registration Form Student's Name	Do they use a	nickname?	Date		
	-				
Address					
Phone# () Date of Birth:/	/ US Citizen: Yes	No What country?	Ethnicity:		
Child's First Language Language Spok	ten at Home	In which country w	vas your child born?		
Father/Guardian's Name	Employer		Work #		
Father/Guardian's Cell Phone #	Email		_Occupation		
Mother/Guardian's Name	Employer		Work #		
Mother/Guardian's Cell Phone #	Email		_Occupation		
Father/Mother's address if different from above					
Are there extenuating family or custody circumstances?	If so, please explai	n below			
Does your family attend church? If so, where?		Tow	/n		
Student's Grandparents Names: Maternal	Paternal				
Address Phone	Address		Phone		
City/State/Zip	City/State/Zi	p			
Other siblings' names & ages:					
Does your child currently attend pre-school/daycare? Please provide a brief description of his/her experience:	_ If so, where?				
What other information about your child would be helpful with his/her adjustment to the center?					
Does your child have any special medical, behavioral, or dev including any documentation you may have and any medicat	elopmental concerns? ions taken	If so, please p	provide a detailed description,		



# Schedule & Rates: July 1, 2018 - June 30, 2019 Hours: 7:30am - 5:30pm

**Little Blessings Childcare Center** is for children aged 6 weeks through 3 years old. Age appropriate programs and developmental activities will be provided for these "Little Blessings".

Please indicate which days and times your child will be attending Little Blessings Childcare Center: (Hours are 7:30-5:30)

M T W Th F

Time: Drop-off Pick-up

Start Date:

### **Registration Fee:**

□ \$80 New Students

□ \$80 Returning Students

Once registered, you are making a financial commitment to the rates and days indicated. For part-time students, should your child miss a day, no credits will be issued, but we will try to accommodate make up days. Please see teacher for availability .

# Monthly, Weekly, and Daily Rates:

#### Infant & 1 Yr Olds

Monthly Rate		\$1,050/month
Weekly Rate - Any	\$263/week	
Daily Rates:		
Four Days	*if available	\$246/week
Three Days	*if available	\$207/week
Two Days	*if available	\$152/week

#### Two Year Olds

onth	Monthly Rate	\$985/month	
k	Weekly Rate - Any p	ortion of 5 days M-F	\$247/week
	Daily Rates:		
k	Four Days	*if available	\$219/week
k	Three Days	*if available	\$175/week
k	Two Days	*if available	\$126/week

• Monthly payments are due by the 10th of each month.

- Weekly payments are due at the beginning of the week.
- Registration fees are nonrefundable
- Monthly tuition payments may be made through an ACH (directly withdrawn from your checking account.)
- Insufficient funds or payments received after the 10th of the month (for monthly payments) are subject to a \$25 late fee.

Marketing: How did you learn about CLA?

Mailer	Sign Driving By	CLA Family:
Newsletter	$\Box$ Word of Mouth	Other:

- I have read the attached financial policy of Little Blessings Childcare and I agree to the terms set forth in it, including the policy that all monies paid to Little Blessings Childcare are non-refundable.
- □ I have read the Statement of Faith, Mission, Philosophy, and Parent Handbook for Little Blessings Childcare Center and I agree to support the administration, faculty, and staff in upholding all policies as well as the mission of the center.
- □ I have discussed Behavior Techniques with a staff member at Christian Life Academy and or Little Blessings Childcare Center.

Signature of Parent/Guardian

Date

