PAID REG: $\_\_\_\_\_\_

SEC DEP: $\_\_\_\_\_\_

CHECK #: \_\_\_\_\_\_

GROUP: \_\_\_\_\_\_

GRADE: \_\_\_\_\_\_

DHS C0-PAY: \_\_\_\_\_\_

**BEFORE AND AFTER SCHOOL**

REGISTRATION FORM

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # - Home:\_\_\_\_\_\_\_\_\_\_ Work:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s D.O.B:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_\_\_ Female/Male\_\_\_\_\_\_\_\_\_\_\_\_

Referred By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check off the days of the week that your child will be attending our before and / or after school program.

Mon.\_\_\_\_\_ Tues.\_\_\_\_\_ Wed. \_\_\_\_\_ Thurs.\_\_\_\_\_ Fri.\_\_\_\_\_

**Start Date: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_**

**School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Before School Only: \_\_\_\_\_\_\_ After School Only: \_\_\_\_\_\_\_ Before & After School: \_\_\_\_\_\_\_**

$90.00 per week $155.00 per week $190.00 per week

Complete this section below if DHS childcare assistance applies: No child can start without a valid active certificate number. Certificate #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \*\*\*\*\*All children need a current, updated general information packet and handbook completely filled out and all applicable payments submitted by their start date.

\*\*\*\*\* I understand that my security deposit will be used for my last week of childcare and that I will be paying my child’s **tuition by the Friday prior to the week your child is attending.**

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Liddle Tots II Teen School Year Policy**

**Initial:**

\_\_\_\_\_ **Tuition:** **Tuition payments must be made by the Friday prior to the week your child is attending.** You are responsible to pay weekly tuition whether your child is absent, out sick, dismissed early, late arrival, the facility is closed due to a legal holiday, and inclement weather (power outage) or snow days. I understand that my security deposit will be used for my last week of childcare. **I UNDERSTAND MY WEEKLY TUITION FEE AND AGREE TO PAY THIS AMOUNT BY THE DATE IT IS DUE. If a payment is not made a $10 late fee will be imposed** **each day the payment is late.**

\_\_\_\_\_\_ **Weekly payments are due the FRIDAY before the week attending daycare.**

\_\_\_\_\_ **VACATIONS: You are allowed 2 weeks per school year.**You must pay for all other weeks. If you would like to take a vacation week, a vacation request form must be filled out and handed in prior to the beginning of the week.

**Please Check off if your child will be attending the following School Vacations:**

Christmas Vacation:\_\_\_\_\_

February Vacation:\_\_\_\_\_\_

April Vacation:\_\_\_\_\_\_\_

 \_\_\_\_\_ **Hours of Operation:** **Monday - Friday 7:00am -5:30pm**

Our before and after school program hours are from 7:00am to 5:30pm. **If extended care hours have not been prearranged, there will be a late fee of $10.00 for the first 15 minutes and a $1.00 per minute thereafter.**

\_\_\_\_\_\_ **Absences:** Parents must notify the center when their child **will not need** van or bus transportation to **and/or** from school on any given day; which includes BEFORE and AFTER SCHOOL. **A $10 no call fee ($25 no call fee for each time after)** will be imposed if we do not receive a call from you informing us of your child’s absence prior to our arrival at his/her school.

Parent Signature: Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Registration Requirements:**

\_\_\_ $30.00 Non-Refundable Registration Fee

\_\_\_ Security Deposit Required- (Held against last week of child care)

\_\_\_ General Information Packet