

ENROLLMENT APPLICATION

Child's name: _____

Date of Birth: _____

Address: _____

Home Phone: _____

E-Mail: _____

Mother's name: _____

Work Phone: _____ Cell Phone: _____

Father's Name: _____

Work Phone: _____ Cell Phone: _____

CARE NEEDED:

Days of the Week: (circle all that apply) M T W Th F

Arrival time: _____ Departure time: _____ Desired beginning date: _____

Preferred center: Waterford East Lyme Killingly Brooklyn
Clubhouse @ The Friendship School Clubhouse @ Clarklane Clubhouse @ Griswold
(please circle)

Preschool children must be completely potty trained in our Waterford & East Lyme Centers.

A non refundable registration fee and a one week tuition deposit must be received with this form to guarantee a place in our program. A 2nd weeks deposit is due within the first month of enrollment. Your two week deposit will be applied to your child's last weeks enrolled at the center provided a two week written notice is given and your child has been enrolled for at least 6 months.

If we informed you that a spot is not currently available and you want to be placed on our waiting list, send no money at this time.

Additional paperwork will be required prior to your child's first day. It is advisable to schedule a day for a brief orientation/visit to make your child's first day with us go as smoothly as possible.

Signature

Date