



## CHILDREN'S CENTER APPLICATION

Child's Name: \_\_\_\_\_

Male     Female    Date of Birth: \_\_\_\_\_

### Parent Information:

1. Parent/Guardian Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

When is the best time to reach you? \_\_\_\_\_

2. Parent/Guardian Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

When is the best time to reach you? \_\_\_\_\_

### General Information:

1. Has child been in a childcare or school setting before? If yes, please describe. \_\_\_\_\_

\_\_\_\_\_

2. Please list the names and ages of other children in the family: \_\_\_\_\_

\_\_\_\_\_

3. Please specify which days and hours you are applying for (according to options on fee schedule): \_\_\_\_\_

\_\_\_\_\_

4. Additional information or comments: \_\_\_\_\_

\_\_\_\_\_