

ENROLLMENT APPLICATION

HOW DID YOU HEAR ABOUT KID 'R' KIDS? _____

TODAY'S DATE _____ DATE OF PREFERRED ENROLLMENT _____

CHILD'S NAME _____ AGE _____ SEX _____ DATE OF BIRTH _____

CHILD'S ADDRESS _____ SCHOOL _____

MOTHER'S NAME _____ MOTHER'S ADDRESS _____

MOTHER'S HOME PHONE _____ MOTHER'S SS# _____ MOTHER'S DRIVERS LICENSE # _____

MOTHER'S EMPLOYER _____ ADDRESS _____

EMPLOYER'S PHONE _____ OTHER PHONE NUMBERS _____

FATHER'S NAME _____ FATHER'S ADDRESS _____

FATHER'S HOME PHONE _____ FATHER'S SS# _____ FATHER'S DRIVERS LICENSE # _____

FATHER'S EMPLOYER _____ ADDRESS _____

EMPLOYER'S PHONE _____ OTHER PHONE NUMBERS _____

*REQUIRED

SECURITY TYPE (VISA / MASTERCARD) _____ CREDIT CARD NUMBER _____ EXP. DATE _____ NAME AS IT APPEARS ON CARD _____

*IF YOU LEAVE THE CENTER WITH A BALANCE ON YOUR ACCOUNT, YOUR CREDIT CARD WILL BE CHARGED WITH THE OUTSTANDING BALANCE.

MARITAL STATUS: () MARRIED () SINGLE () DIVORCED () SEPARATED () WIDOWED

CHILD'S LEGAL GUARDIAN: () BOTH PARENTS () MOTHER () FATHER () OTHER

CHILD'S LIVING ARRANGEMENTS: () BOTH PARENTS () MOTHER () FATHER () OTHER

WE WOULD LIKE FOR YOU TO CARE FOR OUR CHILD _____ ON M-T-W-T-F, FROM _____ UNTIL _____ (GENERAL HOURS).

THE CHILD MAY BE RELEASED TO THE CHILD'S LEGAL GUARDIAN(S) OR TO THE FOLLOWING:

NAME _____ RELATIONSHIP _____ TELEPHONE NUMBER _____