



REGISTRATION FORM

CHILD DETAILS					
Last		First Name		Middle	
Date of birth		Sex (M/F)		Age	
Name of child's previous school					
Reason for leaving					
MOTHER'S DETAILS					
Full Name				SS#	
Occupation		e-mail			
Employer Name & Address:					
Home Address:					
Tel (Home)		Tel (Work)		Tel (Cell)	
FATHER'S DETAILS					
Full Name				SS#	
Occupation		e-mail			
Employer Name & Address:					
Home Address:					
Tel (Home)		Tel (Work)		Tel (Cell)	
PROGRAM DETAILS					
Type of program M/T/W/TH/F (Check one and circle days)	5 Day	5 Half Days	3 Days	3 half Days	2 Day
Admission Date		Drop off time		Pick Up Time	
How did you find us?	Web Site	Yellow Pages	Newspaper	Friends	Other
Can you help with:	Fundraising	Extracurricular activities	Computers	Reading	Other

OFFICE USE ONLY			
Registration Form (LIC 100)		Registration Fee	
Admission agreement (LIC 101)		Monthly Tuition	
Parents Rights (LIC 995)		Security Deposit	
Personal Rights (LIC 613A)		Material Fee	
Emergency Info LIC700		Diaper Fee	
Consent for Medical (LIC 627)		Other	
Pre-Admission Report (LIC 702)		TOTAL	
Physician Report (701) + TB Test			
Copy of Immunization Card			