

ENROLLMENT FORM

Childcare Services

This form is not a Contract.

Due to Covid, please maintain face covering during the interview.

Are you Vaccinated? _____ Yes [] No [] ID/Vaccination Card upon arrival

Last COVID test _____

DATE: _____

Appointment: YES [X]

Child's First Name _____ Last Name _____

Child's Nickname _____ Are you vaccinated? _____ NO [] YES []

Gender: Male [] Female [] Date of Birth _____ Child's Age _____

Home Address _____ City _____ State _____ Zip _____

Mailing address _____

Telephone _____ Primary Email _____

Are you Pregnant? Yes [] No [] If you are pregnant, when are you due? _____

How did you hear about us?

[] INTERNET [] OTHER ONLINE [] [] REFERRAL'S NAME _____

DAYCARE INFORMATION (AGES ACCEPTED SIX WEEKS - 3 YEARS)

Original Hours of Operation MONDAY -FRIDAY 8 A.M. - 5 P.M.

Child's Current Daycare? _____

Date Attended? _____

Reasons for Leaving Current Daycare? _____

How many children would you like to enroll in our program? _____

What led you to apply to this facility? _____

*Part-Time -three days only [] Full-Time []

* Limited spots. The Tots Playhouse Inc. requires a Deposit to reserve your spot.

*YOUR DESIRED START DATE: _____

BASIC INFORMATION:

MOTHER FULL NAME: _____ FAMILY LAST NAME: _____

Home Address _____

City _____ State _____ Zip _____

Occupation _____ Name of Firm/ Employer _____

Primary Phone _____ Alternate Phone _____

Business Address _____ Business Phone: _____

Social Security# _____ Work Hours _____

FATHER FULL NAME _____

Home Address _____ { } Same address

City _____ State _____ Zip _____

Occupation _____ Name of Firm/ Employer _____

Primary Phone _____ Alternate Phone _____

Business Address _____ Business Phone _____

Social Security # _____ Work Hours _____

CONTRACT AND PAYMENTS OPTIONS

Please circle your preference. [] 1-year contract [] 2-year contract Other _____

Does the child have any siblings? [] YES [] NO If yes, what were their ages? _____

Payments Source: PRIVATE [] VOUCHER [] OTHER []

TAX ID is available

PAYMENTS ACCEPTED:

CHASE QUICK PAY [] ZELLE [] CASH [] NO CHECKS

[] I am still seeking other options

[] I would like to reverse a Full-Time Spot

[] I'm ready to sign up

Parent's Signature: _____ ID [Driver's License] _____

NOTICE: A COMPLETED APPLICATION IS NOT A CONTRACT TO ENROLL. THIS FACILITY DOES NOT DISCRIMINATE BASED ON RACE, COLOR, SEXUAL ORIENTATION, OR NATIONAL AND ETHNIC ORIGIN IN THE ADMINISTRATION OF ITS EDUCATIONAL POLICIES, ADMISSIONS POLICIES, AND OTHER DAYCARE-ADMINISTERED PROGRAMS.

