



2019 Full Day Child Care Registration Form

Full Day Care is Monday through Friday
7:00 am to 6:30 pm

Please Print Clearly:

Child's Name _____ Date of Birth __/__/__ Sex __M__F

Child's Street Address _____

City _____ Zip _____

Phone Number (H) _____ Email _____

Parent #1 Name _____

Phone Number (H) () _____ (W) () _____

Company Name _____ Cell Number () _____

Job Title _____ Email: _____

Parent # 2 Name _____

Phone Number (H) () _____ (W) () _____

Company Name _____ Cell Number _____

Job Title _____ Email _____

Full Day Care Infant
5 days per week \$1390.00 per month
4 days per week \$1260.00 per month
3 days per week \$1090.00 per month
2 days per week \$800.00 per month

Full Day Care Toddler
5 days per week \$1320.00 per month
4 days per week \$1175.00 per month
3 days per week \$1010.00 per month
2 days per week \$690.00 per month

Full Day Care Pre-School
5 days per week \$1130.00 per month
4 days per week \$990.00 per month
3 days per week \$850.00 per month
2 days per week \$620.00 per month

Full Day Care Pre-K
5 days per week \$1070.00 per month
4 days per week \$940.00 per month
3 days per week \$800.00 per month
2 days per week \$585.00 per month

Emergency Contacts & Pick-Up Authorization

In addition to the parent(s) who have signed below, the following person(s) are authorized to pick up the child or to be contacted in case of an emergency if neither parent is available to assume responsibility for the child.

Name _____

Day Phone() _____ Cell () _____

Relationship to Child _____

Name _____

Day Phone() _____ Cell () _____

Relationship to Child _____

(FEES EFFECTIVE 1/1/2019-12/31/2019)

Please Check Appropriate Program(s):

- Infant Pre-School
 Toddler Pre-K

If Part-Time, Please Check Appropriate Day(s):

- Monday Tuesday Wednesday
 Thursday Friday

Parents are required to keep this information current by contacting Centenary Early Learning Center with changes.

FEES

- Fees are paid by check, or credit card to **Centenary Early Learning Center** by the 15th of the month prior (ie. September payment will be due by August 15th). Credit card draft is available. Cards are drafted on the 15th of the month prior. Please see the office to set up automatic credit card draft.
- A 10% sibling discount will be applied to siblings enrolled in full time programs.
- Tuition payments are non-refundable
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EZ PAY:

As the parent of _____, I authorize you to charge my credit card whenever tuition is due. _____

(initial)

Parent Signature _____ **Date** _____