

# **Kidzland llc. Enrollment Form**

Please let us know who referred you so we can thank them!

Today's Date: \_\_\_\_\_

Parent/Legal Guardian Name: \_\_\_\_\_

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

Telephone Number: ( H ) \_\_\_\_\_ (W) \_\_\_\_\_

E-Mail Address(es): \_\_\_\_\_

For **Emergency Bulk Text Messaging** we ask that you provide the following:

Parent/Guardian 1: Name: \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Carrier \_\_\_\_\_

Parent/Guardian 2: Name: \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Carrier \_\_\_\_\_

## **Child(ren) Information:**

<b>Child's Name</b>	<b>Birth/Due Date</b>	<b>Schedule(Days and Hours)</b>

**Enrollment Start Date:** \_\_\_\_\_ **\*\*Please note:** We cannot hold a spot for your child longer than 2 weeks from your child's documented start date. If your child's start date is longer than 2 weeks from the original start date above you will be responsible for payment during that time or the spot will be lost.

Registration Fee: **50% of first week tuition** (100% of first week tuition for infant enrollment) **\*Non-refundable\***

Mark if Paid  Check# \_\_\_\_\_ /Cash

Weekly Tuition: \$ \_\_\_\_\_ (May change from the time of this agreement)

**\*\*Tuition must be paid the Friday prior to the scheduled week of care. Tuition is paid whether or not your child attends his/her scheduled hours. If you need to request a schedule change, please notify administrative personnel so that the schedule change can be reviewed and if approved, any necessary staffing changes can be made.**

Special Notes:

**Parent Hand Books – To save on paper we currently send out our parent hand books via e-mail using the e-mail address you provided above. If you wish to have a paper copy of the policies, please let us know.**

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_