

MISS AMY'S LLC

(Miss Amy's Child Care)

REGISTRATION FORM

Please complete the form and turn it in with the registration fee (\$50 Aug-May or \$35 June-July). Spaces are not reserved if the registration payment has not been made. Once the registration payment is made and paperwork is submitted, the parent or guardian shall have 5 days to make any changes to the schedule requested. After 5 days, any requests to change your child's schedule will have to be made in writing two weeks prior to the date requested for the change with the understanding that changes will only be granted according to availability.

Name of Child: _____ Birthdate: _____

Anticipated Start Date, *be specific* (--/--/--): _____ Days of Week **Requested** (circle): **M T W T F**

Pre-School - Please Indicate with Initials all services that apply:

FULL DAYS: _____ HALF DAYS: _____

NUMBER OF DAYS A WEEK: **5** _____ **3** _____ **2** _____ *Please note the four & five-year-old classroom will only be accepting children for three or five days only (either full or half days) – NO EXCEPTIONS.*

BEFORE CARE & AFTER CARE**After Care does NOT apply to half-day children******

_____ Before Care _____ After Care _____ Before & After Care

Signature

*****FOR CENTER USE ONLY*****

Date of Receipt: _____ Received By: _____

Class Teacher upon admission: _____ Attending Music: YES NO

Approved days: **M T W T F** Date of Withdrawal: _____

Reason for Withdrawal: _____