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| **Application for Enrollment** | A close up of a sign  Description automatically generated317-909-3001 futurescholarsdaycare123.com |
|  |  |
| **Child Information** | Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1st Child |
| Last Name | First Name | MI | Nickname |
| Entering Grade | [ ] Male [ ]Female[ ] Prefer not to specify | AgeMO / YR | Birth Date | Birth City/StateCity: State: |
| Existing medical conditions, medications and/or special attention your child may require |
| Allergies |
| Pediatrician’s Name | Phone | Address |
| Photos: May we take and maintain a photo of your child for security purposes?[ ] Yes [ ]No |
|  |
| Primary Hours of Care**FROM** AM / PM **TO** AM / PM  | Days of the Week in Care[ ] Mon [ ] Tues [ ] Wed [ ] Thurs [ ] Fri [ ] Sat [ ] Sun  |
| 2nd Child |
| Last Name | First Name | MI | Nickname |
| Entering Grade | [ ] Male [ ]Female[ ] Prefer not to specify | AgeMO / YR | Birth Date | Birth City/StateCity: State: |
| Existing medical conditions, medications and/or special attention your child may require |
| Allergies |
| Pediatrician’s Name | Phone | Address |
| Photos: May we take and maintain a photo of your child for security purposes?[ ] Yes [ ]No |
|  |
| Primary Hours of Care**FROM** AM / PM **TO** AM / PM  | Days of the Week in Care[ ] Mon [ ] Tues [ ] Wed [ ] Thurs [ ] Fri [ ] Sat [ ] Sun  |

**How did you hear about us?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Comment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Primary Guardian Information***Names(s) of person(s) with whom child is living* |  |
| 1st Primary Guardian |
| Last Name | First Name | MI | Relationship to Child |
| Email Address | Work Phone | Cell Phone |
| Occupation | Employer | Work Address | Work Hours |
| 2nd Primary Guardian |
| Last Name | First Name | MI | Relationship to Child |
| Email Address | Work Phone | Cell Phone |
| Occupation | Employer | Work Address | Work Hours |
|  |
| Which guardian should be called first? | Home Phone | Preferred language for written communication |
| Home Resident Street Address | Apt# | City | Zip Code |
| Mailing Address (if different than above) | Apt# | City | Zip Code |

**Additional Comment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Secondary Guardian Information***Non-primary custodial parent* |  |
| 1st Non-primary Guardian |
| Last Name | First Name | MI | Relationship to Child |
| Email Address | Work Phone | Cell Phone |
| Occupation | Employer | Work Address | Work Hours |
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| 2nd Non-primary Guardian |
| Last Name | First Name | MI | Relationship to Child |
| Email Address | Work Phone | Cell Phone |
| Occupation | Employer | Work Address | Work Hours |
|  |
| Which guardian should be called first? | Home Phone | Preferred language for written communication |
| Home Resident Street Address | Apt# | City | Zip Code |
| Mailing Address (if different than above) | Apt# | City | Zip Code |

**Additional Comment:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Emergency Contacts and Authorized Pickups** |

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| --- |
| 1st Contact/Pickup |
| Last Name | First Name | Relationship to Child |
| Home Phone | Cell Phone | [ ] Able to pick up all children in family[ ] Not able to pick up the following children:  |
| 2nd Contact/Pickup |
| Last Name | First Name | Relationship to Child |
| Home Phone | Cell Phone | [ ] Able to pick up all children in family[ ] Not able to pick up the following children:  |
| 3rd Contact/Pickup |
| Last Name | First Name | Relationship to Child |
| Home Phone | Cell Phone | [ ] Able to pick up all children in family[ ] Not able to pick up the following children:  |

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| **Tuition Information**

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| Your tuition will be:WEEK/MONTH | Required Deposit |

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**SIGNATURE**

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Parent/Guardian Signature Date