



ENROLLMENT APPLICATION

Child's Information:

Date of Birth: _____

Gender: Male Female

Name: _____

Preferred Nickname: _____

Physical Address: _____

Street

City

State

Zip Code

Is the child potty trained? Yes No Is your child currently on an IFSP/IEP? Yes No

IFSP IEP

We will work with any special education provider that your child may need and include ALL children in our daily activities, including those with special health care needs or any disabilities.

Enrollment Information:

Enrollment Date: _____

Hours of Operation: Monday- Friday
7AM-6PM

Preferred Start Date: _____

Enrollment requires a NON-REFUNDABLE Application Fee & a deposit of the 1st week

Full-Time:

3 or more days in care is considered full-time. Please indicate which days your child will be attending.

Monday Tuesday Wednesday Thursday Friday

Hours: Drop-off time: _____ Pick-up time: _____ (10 hour maximum)

How did you hear about us? _____

Family Information:

Mother/Guardian:

Name: _____

Address: _____

Home #: _____ Cell #: _____

Email Address: _____

Employer: _____

Address: _____

Work #: _____

Father/Guardian:

Name: _____

Address: _____

Home #: _____ Cell #: _____

Email Address: _____

Employer: _____

Address: _____

Work #: _____

Please indicate the number you prefer contacted:

Home Cell Work

Please indicate the number you prefer contacted:

Home Cell Work

Child lives with: Mother Father Both Other _____

26 Creamery Ln.
Easton, MD 21601
(667) 202 1649

info@thelabchildcarecenter.com
www.thelabchildcarecenter.com



ENROLLMENT AGREEMENT

A parent or guardian (the "Parent") may apply for current or future placement for his or her child (the "Child") at The Lab Child Care Center (the "Center") by completing and signing this Enrollment Application and returning the application to the Center, accompanied with the *non-refundable* Enrollment Application Fee.

Upon the return of the completed application and payment of the application fee, the Child will be considered for enrollment at the Center. If no space is immediately available, the Child will be placed on the Center's Waitlist and considered according to the date of the application and payment received. The Center reserves the right to accept or not accept a Child at its sole discretion. The Parent agrees to accept such a decision as binding and final in all respects. *The application fee is non-refundable*, except under the following circumstances:

- The Enrollment Application Fee will be refunded to the Parent if the Child is not accepted to the Center
- OR
- Prior to the Parent being notified that a space for the child has become available, the Parent provides the Center a written request for refund, indicating that the Parent has chosen not to enroll the child. The Child's name will then be taken off the Waitlist and the application fee will be refunded within thirty (30) days.

The Center will notify the Parent when a space for the child becomes available. The Parent will then be required to sign a Financial Agreement and pay a deposit of the first week to secure the Child's placement. A Registration Packet will be given to the Parent to complete and return to the Center. By the Child's first day of attendance, the Parent will be required to sign a Service Agreement, the Parent Handbook Acknowledgment Form, and other forms that are found in the packet.

The Parent is to contact the Center if they no longer wish for the Child to be on the Waitlist or if any of the information on the application needs to be changed.

Any correspondence to the Parent will be mailed to the Parent's address on file. Please promptly notify the Center, in writing, of any change in address. If the Parent does not respond to correspondence within the time period given on such correspondence, the application will be removed from the Waitlist and the Enrollment Application Fee will not be refunded.

The Center reserves the right to change its enrollment procedures or fees at any time.

*I confirm that I have read, understand, and agree to the above enrollment procedures and information for
The Lab Child Care Center*

Parent Signature

(Application will not be processed without signature)

Date

26 Creamery Ln.
Easton, MD 21601
(667) 202 1649

info@thelabchildcarecenter.com
www.thelabchildcarecenter.com