Mt. Zion – Toddler Program

For Chilren One and Walking Independently

2010-2011 School Year Registration Application

Child's Full Name:_____ Birth date _____

Home Address:_____ City _____ Zip _____

Home Phone:_____ Cell Phone:_____

E-Mail Address _____

PLEASE CIRCLE THE PROGRAM THAT APPLIES

Toddler Program (7:00am-5:30pm) – Full Day

2 day - $562.00 3 day - $859.00 4 day- $1,013.00 5 day - $1,167.00

Application Fee due
$50.00
(*non-refundable*)
Date Rec'd _____
Amount Pd.$_____
Check # _____

Toddler Program Half Day – Morning Session 7:00am-12:00pm or
Afternoon Session 12:00pm –5:00pm

2 day - $281.00 3 day - $429.00 4 day - $507.00 5 day - $573.00

After 5:30 pm Late Pickup fees are: 1-5 minutes - $10; 5-10 minutes - $20; 10-15minutes - $30; etc.

Approximate Drop Off Time _____Pick Up Time:_____

Mother's Name _____ Occupation _____

Employer _____ Work Phone _____

Father's Name _____ Occupation _____

Employer _____ Work Phone _____

Mail should be addressed to: _____
(e.g., Mr. and Mrs. …)

_____

Please list brothers and sisters and their ages:

Family Home Church _____

Child's Baptismal Birthday _____

Please list **(on the back)** any medical information about your child that Mt. Zion staff should know:

Please share **(on the back)** any other information about your child that would be helpful for Mt. Zion staff to know:

Has your child been enrolled in an early childhood program before? Yes___ No___ OPTIONAL: If you answered "yes," it may be helpful for the staff to know the type(s) of programs your child has experienced; list the school(s) or type of programs **(on the back)**:

How did you hear about Mt. Zion? Yellow Pages_____ Word of mouth_____ Church_____ Internet_____
Other _____

_____ _____

SIGNATURE OF PARENT/GUARDIAN DATE