

LITTLE BEARS ENROLLMENT APPLICATION

Date: _____ Child's Name: _____

Age: _____ Birth Date: _____ Gender: Male Female

Mother's Name: _____

Father's Name: _____

P O Box _____ Street Address: _____

City: _____ Home Phone: _____

Email address: _____

Child's Nicknames: _____

Child's Siblings: _____ Age: _____

_____ Age: _____

_____ Age: _____

If the parents are divorced or separated, please provide the necessary custody information and paperwork.

Due after acceptance and prior to attendance:

- Recent physical exam
- Up-to-date immunizations or notarized exemption of immunization form
- Completed and signed Emergency Child Record card
- Field Trip Permission form
- Photo Permission form
- Parent Handbook Statement of Understanding
- Parent Release Form

Our hours are 7am – 6pm Monday through Friday. Municipality code requires that a child's daily attendance may not exceed 10 hours.

Summer Session (June 1 – August 31)

Days of the week requested: M T W Th F

Fall/School Session: September 1 – May 31

Days of the week requested: M T W Th F

When would you like your child to begin? _____