

**Battle Creek Christian Early Learning Center
CHILD ENROLLMENT FORM**

CHILD'S NAME _____ DATE OF BIRTH _____ MALE / FEMALE _____

Program my child will be enrolled in:

<p>Infant (birth-12 months)</p> <p><input type="checkbox"/> 5 days (\$40.50/day)</p> <p><input type="checkbox"/> 4 days (\$42.50/day)</p> <p><input type="checkbox"/> 3 days (\$44.50/day)</p> <p><input type="checkbox"/> 2 days (\$46.50/day)</p> <p><input type="checkbox"/> 1 day (\$48/day)</p> <p>Toddler (13-36 months)</p> <p><input type="checkbox"/> 5 days (\$38/day)</p> <p><input type="checkbox"/> 4 days (\$40/day)</p> <p><input type="checkbox"/> 3 days (\$42/day)</p> <p><input type="checkbox"/> 2 days (\$44/day)</p> <p><input type="checkbox"/> 1 day (\$46/day)</p>	<p>Preschool (3-5 years)</p> <p><input type="checkbox"/> 5 full days (\$35/day)</p> <p><input type="checkbox"/> 4 full days (\$37/day)</p> <p><input type="checkbox"/> 3 full days (\$39/day)</p> <p><input type="checkbox"/> 2 full days (\$41/day)</p> <p><input type="checkbox"/> 1 full day (\$43/day)</p> <p>-----</p> <p><input type="checkbox"/> 5 half days (\$19.50/day)</p> <p><input type="checkbox"/> 4 half days (\$21.50/day)</p> <p><input type="checkbox"/> 3 half days (\$23.50/day)</p> <p><input type="checkbox"/> 2 half days (\$25.50/day)</p> <p><input type="checkbox"/> 1 half day (\$27.50/day)</p> <p>(Half day = less than 5 hrs)</p> <p>GSRP (Monday-Thursday 8-3 / Sept.-May)</p> <p><input type="checkbox"/> Bible time 3-3:20 (FREE)</p> <p><input type="checkbox"/> Before class (\$8/day)</p> <p><input type="checkbox"/> After class (\$10/day)</p> <p><input type="checkbox"/> Friday (\$30)</p> <p><input type="checkbox"/> As Needed Care</p> <p>(After class \$12; Before class \$10; Full day \$35)</p> <p>*GSRP is for qualifying children only.</p>	<p>School Age (kindergarten-12 years)</p> <p><input type="checkbox"/> Before school (\$8/day)</p> <p><input type="checkbox"/> After school (\$10/day)</p> <p><input type="checkbox"/> Before & after school (\$85/week)</p> <p>For those signed up for before and/or after school: Full day rate: \$30/day Half day rate: \$19.50 (for no school days & delays)</p> <p><input type="checkbox"/> As needed (back-up, breaks, etc.)</p> <p>Rates for as needed:</p> <p>Before school \$10</p> <p>After school \$12</p> <p>Full day \$35/day</p> <p>Half day \$22/day (less than 5 hrs)</p> <p>School attending: _____</p> <p>Grade: _____</p>
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Registration fee \$50 per family (\$25 annually-Billed Oct. 1) Deposit = One week tuition (applied to last week of care)

Key fobs needed:

1 (included w/registration) 2 (\$10) other amount (indicate how many needed/\$10 each)

My child's first day will be: _____

My child will attend the following days:

	Monday	Tuesday	Wednesday	Thursday	Friday
Approximate Arrival Time					
Approximate Departure Time					

All schedule changes must be approved by the office staff in advance.

Parent/Guardian Signature

Date

*****OFFICE USE ONLY*****

	Registration Fee		Child Info Card		Brightwheel Set-up/Kid Reports		Fingerprint / Bypass Registration
	Deposit		Consent/Release		COR (Infant/toddler/preschool)		Health Appraisal (Infant/toddler/preschool)
	Contract		CACFP Claiming Tier: _____		Procure Registration		Immunizations (Infant/toddler/preschool)
	DHS YES / NO		Scholarship YES / NO		Email List		Statement of Good Health (School Age Only)
	Classroom assigned to:				Fob Issued Fob numbers:		