



Child's Name _____ Sex _____ Birth date _____

Home Address _____ City _____ Zip _____

Home Phone _____ Home e-mail _____

Child's Place of Birth: City _____ State _____ Country _____

List any allergies _____

Parent/Guardian 1 _____ SS# _____

Employer _____ Business Phone _____ Work Hours _____

Home Address _____ City _____ Zip _____

Home Phone _____ Mobile/Pager _____ E-mail _____

Birth date _____

Parent/Guardian 2 _____ SS# _____

Employer _____ Business Phone _____ Work Hours _____

Home Address _____ City _____ Zip _____

Home Phone _____ Mobile/Pager _____ E-mail _____

Birth date _____

Person(s) or Agency having legal custody of child (if not listed above):

Name _____ SS# _____

My signature and registration fee will hold my child's place for the date agreed upon:

_____ Date

Enrolling Parent/Guardian Signature

Center Registering for:

- Barony
- Ellwood House
- Harbor
- Innsbrook
- Midview
- West

Program:

- Infant
- Toddler
- Preschool
- Private Kindergarten
- After School⁽¹⁾

Schedule:

- Full Time
- Part Time Half Day
 - ◇ Monday
 - ◇ Tuesday
 - ◇ Wednesday
 - ◇ Thursday
 - ◇ Friday

⁽¹⁾ After School Information

School _____

Teacher _____

Grade _____

TUCKAWAY OFFICE USE ONLY

Application Received: _____

Interview Date: _____

Registration Paid: _____

Wait List Paid: _____

Desired Entrance Date: _____

Date of Enrollment: _____