

## Child's Application for Precious Lambs Early Learning Center

To be completed and placed on file prior to enrollment

Please note that information in this application is important for the teachers of Precious Lambs to meet your child's needs. This information is to help us to best understand and support your child in his/her growth and development.

As our handbook states, we do not discriminate based on race, ethnicity, national origin, disability, or family background. We welcome all children as God's own precious children and enroll all of whom we can meet the physical and developmental needs.

It is our mission to share the love of Jesus with all children and families by providing an excellent education in a nurturing, Christ-centered environment.

Application Date	Preferred Enrollment Da	ate	Enrollment Date	
Preferred Classroom		Preferred Scheo	dule (T/Th; MWF; M-F)	
CHILD'S IDENTIFYING INFORMATION				
Child's Name(First)	(Middle)	(Last)	(Nickname)	
, ,	,		e of Birth	
Child's Address				
FAMILY INFORMATION				
Father/Guardian's Name		Cell #		
Home phone #	Work #	Email <i>F</i>	Address	
Address (circle one) SAME AS CHILD	OTHER			
Employer Work Address				
Best way to reach you during typic	al school hours			
Marital Status: First Marriage	Separated Divorced	Remarried	Widowed	
Mother/Guardian's Name		Cell #		
Home phone #	Work #	Email <i>F</i>	Address	
Address (circle one) SAME AS CHILD	OTHER			
Employer	Wo	rk Address		
Best way to reach you during typic	al school hours			
Marital Status: First Marriage	Separated Divorced	Remarried	Widowed	
If remarried, who is the child's biological parent? Father Mother				
Is there anything else we should know about legal guardianship of your child?				



MEDICAL INFORMATION		
Did you have any complications in pregnancy or birth?		
Does your child have any known allergies? No Yes		
If yes, please give information about allergens and reactions:		
Does your child have any chronic illnesses/conditions? No Yes  If yes, explain:		
Does your child take any medications regularly? No Yes If yes, explain:		
If you do administer a medication before bringing your child to school, please communicate this to your child's teacher. Also note that Precious Lambs is not authorized to administer any medications, except for life-saving medications. Please note below and talk to the director if your child needs a life-saving medication on premises. Additional permission forms will be needed.		
Is there anything else regarding the physical health of your child that we should know?		
CARE AND EDUCATION BACKGROUND AND NEEDS		
Previous Care/Education		
Contact Person/Teacher Phone No		
Any other information about previous care & education		
Why have you chosen Precious Lambs to continue your child's education and growth?		
What might be a challenge for your child or your family at Precious Lambs?		
What might be a challenge for your child or your family at Precious Lambs?  Things you feel your child will excel at		

## AGREEMENT TO FINANCIAL RESPONSIBILITY AND ALL POLICIES OF PRECIOUS LAMBS EARLY LEARNING CENTER

My child will attend Precious Lambs Early Learning Center and participate fully in its educational programs. I understand that Precious Lambs will provide its full range of classroom, educational and religious programs to my child. I understand that all children are enrolled so long as the teachers, director and committee of Precious Lambs Early Learning Center, along with the parents, determine that the needs of my child can be adequately met in our program.

I have received information about current tuition pricing. I agree to pay all tuition and fees, including late fees and penalties for past due accounts in the amounts specified by the school in the handbook.

I understand that monthly tuition is due by or on the 1<sup>st</sup> of each month, and weekly tuition is due by the Friday before each week in which education and care is given.

I understand that failure to pay for tuition within two weeks of the date owed will terminate the enrollment of my child from the school.

I understand that temporary absence from school for sickness or vacation does not exempt me from payment of tuition owed during this time.

If I am not able to continue to meet this financial obligation, either temporarily or indefinitely, I will immediately discuss this matter with the director. Funds for emergency or long-term tuition assistance are in place, but responsible, timely, and honest requests for assistance are necessary to receive it.

Your signature indicates that you have read this entire enrollment form carefully and provided correct information to the best of your knowledge. You hereby give your consent and agreement to all the above.

It further indicates that you have read and intend to abide by all the policies and procedures of Precious Lambs Early Learning Center and its programs which are included in the handbook.

Parent Signature	Date