

Quail Springs Baptist Church
Weekday Ministries
Mother's Day Out
2012- 2013

FOR OFFICE USE ONLY

Enrollment Fee \$ _____

Date _____

Time received _____

Check # _____

Placement _____

For children 2 months – 2 years old
Class times 9:30 a.m. to 2:30 p.m.
Non-Refundable Enrollment Fee \$50

I wish to enroll my child in: Please check desired days

Mother's Day Out _____ Monday
_____ Wednesday
_____ Both Monday and Wednesday

Child's Date of Birth: _____

Please fill out completely

Child's full name: _____
(Last) (First) (Middle Initial)

Name child goes by: _____ Sex: M F

Home Address: _____

City: _____ Zip: _____ Home Phone: _____

Child lives with: Mother _____ Father _____ Both _____ Other _____

Father's (or Guardian's) Name: _____

Place of Employment: _____

Work Phone: _____ Cell Phone: _____

Mother's (or Guardian's) Name: _____

Place of Employment: _____

Work Phone: _____ Cell Phone: _____

Email address(es) where you would like school information to be sent: _____

Members of what church: _____

Siblings also enrolled in this program(names and ages) _____

Persons to contact (after parents) in case of emergency, and persons having permission to pick up child:

Name _____ Relation to Child _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relation to Child _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relation to Child _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relation to Child _____

Home Phone _____ Work Phone _____ Cell Phone _____

Health Information

Child's usual physician or clinic _____ Phone: _____

Health Problems _____

Food Allergies _____

Other Allergies _____

Specify any physical disabilities or limitation in activities recommended and why: _____

List all prescribed medication: _____

Other Information

This year we may take various pictures of your child that may be used in the classroom, for displays in our school, and/or slide shows for the parents and the school. Please circle yes or no below to indicate if we have permission to do so and sign.

Yes I give permission

Parent's Signature _____

No I do not give permission

All of our policies and procedures regarding things such as illness regulations, tuition due dates and late fees, late pick-up fees, etc., are outlined in our 2012-2013 Parent Handbook. Please read this carefully as it should answer many of your questions.

I have received a copy of the 2012-2013 Parent Handbook, and I agree to abide by the policies contained within.

Signature of Parent/Guardian _____ Date _____

In order to accept this enrollment, we must have all necessary paperwork and the \$50 enrollment fee paid at the time of enrollment.

This enrollment fee is non-refundable.