

Jenkins ECLC Full Day Programming 2018-2019 Registration

Child's Last Name _____ First Name _____ () Male () Female

Street Address _____ City _____ ZIP code _____

Birthdate ____/____/____ Child's Age on September 1, 2018: ____year(s) and ____month(s)

Primary Family Email Address: _____

Resident of Dexter Community Schools district? () Yes () No

Are you a DCS full time staff member? () Yes () No If yes, which Building/Department _____

I am registering my child for Full Day Childcare:

*One day is up to ten hours of care between 7am and 6pm

() Infant () Older Infant () Toddler () Preschool 3 () Preschool 4

_____ Full week (Four or Five Days) Estimated Schedule* ____am - ____pm

_____ Daily (Circle days) M T W TH F Estimated Schedule* ____am - ____pm

_____ Ten Months (Aug 27, 2018-June 14, 2019- No school December 24-Jan 1, plus posted holidays).
This is a 41 week schedule.

_____ Full Year (Aug 27, 2018-Aug 16, 2019- No School Dec 24-Jan 1, July 1-5, and Aug 19-23, plus posted holidays).
This is a 49 week schedule.

_____ My child is proficiently potty trained. (A requirement for 3 and 4 year old classrooms.)

Child will begin attending beginning () August 27, 2018 () Other Date (please list) _____

Parent 1/Legal Guardian's Name _____ Cell Phone _____

Work Phone _____ Home Phone _____ Birthdate ____/____/____

Parent 2/Legal Guardian's Name _____ Cell Phone _____

Work Phone _____ Home Phone _____ Birthdate ____/____/____

Child Lives with: Both () Parent/Guardian 1 () Parent/Guardian 2 ()

Before your child can begin childcare, you must have turned in to our office:

- This registration form, with **\$75 Registration fee (Non-refundable)**
- **Completed Registration Packet (Mailed to you in July) by August 1, 2018**
- First payment is **due August 15, 2018**

Parent/Guardian Signature _____ Date _____

*A confirmation email will be sent by April 6 or within one week of receipt of this form after 4/6/18

For office use only:

Received by: _____ Date received: ____/____/____ NUMBER: _____

Confirmation sent by: _____ on ____/____/____ CN# _____ Reg. FEE: ____check/cash ____CC