

**LITTLE LAMBS EARLY CHILDHOOD CENTER
REGISTRATION FORM**

CHILD'S NAME: _____ DATE OF BIRTH: _____
(Nickname)

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(Nickname)

PARENT'S NAMES: _____

ADDRESS: _____

PHONE NUMBERS: _____ (CELL) _____ CITY _____ ZIP CODE _____ (WORK)

PHONE NUMBERS: _____ (CELL) _____ (WORK)

EMAIL: _____

CHILDCARE AND PRESCHOOL: July 1-August31 Sept 1-Dec 31 Jan 1-?

INFANTS (6 Wks-14 Mos) _____ \$180.00 PER WK \$190.00 PER WK \$200.00 PER WK

TODDLERS (15 Mos-23 Mos) _____ \$170.00 PER WK \$180.00 PER WK \$190.00 PER WK

2 YR OLDS (24 Mos-36 Mos) _____ \$160.00 PER WK \$170.00 PER WK \$180.00 PER WK

3 YR OLDS & UP _____ \$140.00 PER WK \$150.00 PER WK \$160.00 PER WK

(MUST BE POTTY TRAINED)

SINGLE DAY RATES IF AVAILABLE:

INFANTS AND TODDLERS: \$55.00 TWO YEARS OLD: \$45.00 3 YEARS OLD & UP: \$40.00

(EVERY FAMILY PAYS THE FULL WEEKLY RATE EVERY WEEK WITH NO EXCEPTIONS)
CHILDCARE - PLEASE INDICATE WHAT DAYS AND HOURS YOU NEED - OPEN 6:30 am/CLOSE 5:30 pm

CIRCLE DAYS: MON. TUES. WED. THURS. FRI.

DROP OFF TIME: _____ PICK UP TIME: _____

DOES THIS SCHEDULE VARY? PLEASE EXPLAIN: _____

TO HOLD YOUR CHILD'S PLACE IN A CLASS, PLEASE RETURN THE FOLLOWING:

1. COMPLETED BLUE REGISTRATION FORM

2. NON-REFUNDABLE REGISTRATION FEE - \$75.00 PER CHILD/\$100.00 PER FAMILY

PLEASE MAKE CHECKS PAYABLE TO "LITTLE LAMBS" AND MAIL/BRING TO

1800 S. RANEY ST. #1 EFFINGHAM, IL 62401

(School use only: DATE RECEIVED: _____ REG FEE CHILD: _____ FAMILY: _____ CASH: _____ CHECK: _____)

(START DATE: _____ CLASS: _____ VISIT: _____ FORMS: _____)