

Cozy Corner Enrollment

Child's Name:	Date of Birth
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Address:	City:	State:	Zip
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Home Phone: _____

Mother's Name	SS#	Phone
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Address	City	State	Zip
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Work Place	Phone
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Father's Name	SS#	
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Address	City	State	Zip
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Work Place	Phone
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Child's School	Grade	Teacher
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Child's Doctor	Phone
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Allergies: _____

Any Physical, Emotional or Learning Disabilities we should be aware of so we can better care for your child? _____

Emergency Contact People

Name	Phone
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Address _____

Name	Phone
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Address _____

The following is a list of people allowed to pick up my child in my absence. Picture ID will be required. Is not necessary to fill in all lines. We will not allow exceptions by phone request for your safety, But would appreciate a call letting us know of any changes.

Name	Phone
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Name	Phone
------	-------

Name	Phone
------	-------

Name	Phone
------	-------

Name	Phone
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How did you hear about us? _____

Did someone refer you? _____ If so, who? _____

Cozy Corner Enrollment (cont)

This side to be completed with our director:

Date of Enrollment	Care will start:
Registration Paid \$	Full or Part Time:

Type of Care needed:		Ocean Room	Infants	0-18 months
		Mountain Room	Toddlers	18 months - 2.5 yrs
		Sky Room	Preschool I	2.5 yrs. - 3yrs.
		Space room	Preschool II	4 yrs. - 5yrs.
		Space Room	Latchkey	5 yrs - 12 yrs

Days and Times Needed							
	Time		Time	Time		Time	Cost
Monday		To			To		\$
Tuesday		To			To		\$
Wednesday		To			To		\$
Thursday		To			To		\$
Friday		To			To		\$
Transportation to or from School \$3.00 x days = \$							
Weekly Total Amount Due							\$
Payment Type:		Private Pay	F I A pay		Co-Sponsored Pay		

Additional Charges

- Extra hour of care \$ 5.00 per hour
- Late pick up fee \$ 15.00 every 15 minutes past closing starting at 6:31 PM
- Late payment fee \$ 15.00 Payment is expected each week.
- Returned Checks for non-payment \$15.00
- Forgotten Lunch fee \$ 2.00

I have been explained and understand the following charges. I agree to my weekly amount. If my child is absent I may use an Absent Credit coupon in place of payment. If I need to add an additional day to my child's schedule I will call and get approval from their teacher or the director. I will add any additional charges to my weekly amount. I understand that if my child is signed up for Latchkey, and I need care when school is closed for any reason, I need to give one week notice to teacher in order to come., and the cost will be a full day.

(This is so we can prepare for the number of children that day.)

I give Cozy Corner Permission to use my child's picture on their website (no names are ever used): Yes _____ No _____

Parent Sign _____ Date _____

Director Sign _____ Date _____