

Parent/Guardian Information

Registration Date: _____

Mother/Guardian First Name: _____ M.I. __ Last Name: _____

Address: _____

Occupation: _____ Home Phone: () _____

Employed By: _____ Office Phone: () _____

Work Address: _____ Work Hours: _____

Custodial Parent (If married, mark both parents) Mother/Guardian SS#: _____

Note: S.S. # required for tax purposes.

Email: _____ Driver's License #: _____

Cell Phone: () _____

Marital Status: [] Married [] Single [] Divorced [] Separated [] Widowed

[] Other _____

Father/Guardian First Name: _____ M.I. __ Last Name: _____

Address: _____

Occupation: _____ Home Phone: () _____

Employed By: _____ Office Phone: () _____

Work Address: _____ Work Hours: _____

Custodial Parent (If married, mark both parents) Mother/Guardian SS#: _____

Note: S.S. # required for tax purposes.

Email: _____ Driver's License #: _____

Cell Phone: () _____

Marital Status: [] Married [] Single [] Divorced [] Separated [] Widowed

[] Other _____

Instructions for reaching Parent/Guardian:

Child Information

Child First Name: _____ M.I. _____ Last Name: _____

Name child prefers to be called: _____

Child's Address: _____

Gender: Male Female Date of Birth: _____ Child's S.S. #: _____

Note: Child's S.S. # required for tax purposes.

Photographs: May we take and maintain photo of your child for security and/or marketing purposes?

Yes No

Emergency Contacts & Authorized Pickup Persons (including Parent/Guardian):

Mother Father Guardian

Additional Contact/Pick Up

Name: _____ Phone: _____

Alternative Phone: _____ Email address: _____

Relationship to the Child: _____

Additional Contact/Pick Up

Name: _____ Phone: _____

Alternative Phone: _____ Email address: _____

Relationship to the Child: _____

Additional Contact/Pick Up Persons information can be included on a separate sheet.

Please Note: It is the parent's responsibility to notify the Children's World Director, in writing, if any of these authorized contact/pickup persons change. In the event of emergency only the Parent/Guardian can authorize a different pickup person by email to cwdirector@ctkdurango.org and follow-up by phone.

Additional Comments & Information:

Is there is any other information that that would be helpful to our management and teaching staff? (Use additional sheet if necessary).

Withdrawal from Children's World: 30 days' **written** notice is required for withdrawal of any child. Whether or not the child attends for that month, the family will be charged for that month. If 30 days' written notice has been given, the Enrollment Deposit will be refunded, less any balance due.

Signature:

Parent/Guardian Signature: _____ Date: _____

Thank You!

FOR OFFICE USE ONLY

Collection of Fees:

Full Pay

Current Tuition Amount: _____ monthly

Activity Fee - \$50.00 (due the 1st of September each year)

Enrollment Deposit - \$200.00

Registration Fee - \$50.00

Child Start Date _____

Other: _____

CCAP transfer to Full Pay

Parent/Guardian First Name: _____ M.I. __ Last Name: _____

Full Pay

Current Tuition Amount: _____ monthly

Enrollment Deposit - \$200.00

Child Start Date _____