

TAMUC CHILDREN'S LEARNING CENTER

Date: \_\_\_\_\_

APPLICATION FOR ENROLLMENT

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_-\_\_\_\_-\_\_\_\_ Age \_\_\_\_\_

Mom's Name: \_\_\_\_\_ Dad's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mom's E-Mail Address: \_\_\_\_\_

Dad's E-Mail Address: \_\_\_\_\_

Mom's Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Dad's Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Mom's Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ CWID: \_\_\_\_\_

Dad's Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ CWID: \_\_\_\_\_

Mom's Employer: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Dad's Employer: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Classification: { }Student { }Faculty/Staff { }Community

Semester You Are Applying For: \_\_\_\_ Fall-20\_\_\_\_(Year) \_\_\_\_ Spring-20\_\_\_\_(Year) \_\_\_\_ Summer\_\_\_\_(Year)

Days You Will Need Care: \_\_\_\_ Mon-Fri \_\_\_\_ Mon, Wed, Fri \_\_\_\_ Tues & Thurs \_\_\_\_ Mon-Thurs

Customized Days if Available: \_\_\_\_\_

How did you hear about the CLC? \_\_Website \_\_Facebook \_\_Current Family \_\_\_\_\_ \_\_Other\_\_\_\_\_

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**REGISTRATION FEE IS NON-REFUNDABLE!**

Registration Fee: 1<sup>st</sup> Child: \$75.00 2nd or More Children: \$65.00 After School or KID CAMP: \$35.00

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

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Registration Fee Paid: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Class: Caterpillars Butterflies Ladybugs Pathfinders Wanderers

Start Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Discoverers Adventurers Voyagers Pioneers Navigators Backpackers Scouts

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**FAMILY ORIENTATION PLAN** The family orientation plan introduces children and their parents to the program.

- Tour of facility \_\_\_\_\_ Introduction to teaching staff \_\_\_\_\_
- Parent visit with classroom teacher \_\_\_\_\_ Overview of parent handbook \_\_\_\_\_
- Discussion of expectations of family and the needs of the child \_\_\_\_\_
- Overview of available family support resources and activities \_\_\_\_\_ Interpreter available if needed \_\_\_\_\_
- Opportunity for extended visit in the classroom by both parent and child for a period of time to allow both to be comfortable in the new surroundings \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director Signature

\_\_\_\_\_  
Date