

# Corridor Christian Early Learning Center

a ministry of Heartland Community Church

## Enrollment Application

For office use only: Application Date: \_\_\_\_\_ Start Date: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_ Sex [ ] M [ ] F

Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ If expecting: Due Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Anticipated Start \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How did you hear about our center? \_\_\_\_\_ Hours of care needed: \_\_\_\_\_ -- \_\_\_\_\_

Circle days to attend: Monday Tuesday Wednesday Thursday Friday

Father's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's place of employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Work Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Mother's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's place of employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Work Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Parental status:

Father Mother

- ☐ ☐ Married  
☐ ☐ Single  
☐ ☐ Separated  
☐ ☐ Divorced

Father Mother

- ☐ ☐ Divorced, remarried  
☐ ☐ Widowed, remarried  
☐ ☐ Deceased

A non-refundable application fee of \$ \_\_\_\_\_ (Date paid \_\_\_\_\_) is prepaid to reserve child's space  
☐ in the \_\_\_\_\_ room / ☐ on the waitlist. The final registration fee of \$ \_\_\_\_\_ (Date paid \_\_\_\_\_) is  
due upon completion of paperwork.

The undersigned understands that care is billed at the rate of \$ \_\_\_\_\_ per month/week to be paid the  
Friday prior to the care provided. The following are paid holidays in which the center will be closed: New Year's  
Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the Friday after Thanksgiving, and  
Christmas Day. The center will also close early on Christmas Eve and New Year's Eve. No refunds or credits will  
be given on these days.

The undersigned agrees to promptly notify the center of any changes of the above information.

This form is legally binding, and with your signature, you agree that all of the information provided herein is  
correct. Providing false information could result in termination of childcare services, forfeiture of registration  
fees, or both.

Father/Guardian Signature	Date
Mother/Guardian Signature	Date
Corridor Christian ELC Management	Date

\*This agreement may be terminated by either party upon written notice.