2017-2018
Pre-Enrollment

□ Hartford □ Claremont □ Extended Day
□HASP □ DBS □ OQS
Kid's Connection □ Disnard □ Maple □ Bluff

For Office Use Only:
Form Received: _____
Payment Received: _____
Class Assigned to: _____

CHILD INFORMATION

_____ _____M _____F _____/_____/_____ _____/_____/_____
Child's Name Sex Date of Birth **Anticipated Start Date**

Check Appropriate Group Room:
□ Infant One □ Infant Two □ Early Pre □ Pre School 1 □ Pre School 2 □ Pre School 3 □ Pre K
□ DBS One □ DBS Two □ OQS One □ OQS Two - □ Disnard □ Maple □ Bluff

Schedule (if applicable): O 5 Day O 3 Day(M/W/F) O 2 Day(T/Th)

FAMILY INFORMATION

Parent/Guardian #1

_____
Name
_____
Address
(_____) _____
Phone
(_____) _____
Alternate Phone
_____
Email Address
_____
Relationship To Child

Parent/Guardian #2

_____
Name
_____
Address
(_____) _____
Phone
(_____) _____
Alternate Phone
_____
Email Address
_____
Relationship To Child

DEPOSIT & REGISTRATION FEE

One Week Deposit $_____ (Refundable) ***
Registration Fee $25.00 (Non-Refundable)
Total Due upon Pre-Enrollment: $_____

We require a non-refundable registration fee and a one week, refundable deposit to confirm your child's enrollment. Two weeks' notice is needed for scheduling changes or withdrawal from the program. If two weeks' notice is not provided, there is an outstanding balance on your account or **you decide to not enroll your child in the program, the refundable deposit will not be returned to you.**

PARENT/GUARDIAN SIGNATURE

_____
Parent/Guardian Signature Date

Please return completed form with payment for confirmation of child care arrangements.

Green Mountain Children's Center

92 Farm Vu Drive
White River Junction, VT 05001
p: 802.296.2296 f: 802.296.3117

90 Charlestown Road
Claremont, NH 03743
p: 603.543.0391 f: 603.543.6734

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