

Lifehouse Childcare 2019-2020 Registration Form

Registration fee is \$50.00 and needs paid before your child can attend the summer or fall session. *If your child is enrolled in preschool, this fee will be waved.* Checks can be made out to Lifehouse Preschool.

Please note that Childcare spots will be given on a first come, first served basis and current childcare families will have priority. Your spot is not guaranteed until you have received a message confirming we have the space for your child. If you have further questions, please contact Mallory@lifehousefw.com or 260-637-3798 ext. 3.

Child's Name: _____ What you prefer we call your child _____
Child's age: _____ DOB _____ M / F
Address: _____
Best Contact Telephone number _____
Best way to contact: Phone _____ Letters in bag _____ Email _____
Father's Name: _____ Phone # _____ Work# _____
Employer: _____ Home Church: _____
Mother's Name: _____ Phone# _____ Work# _____
Employer: _____ Home Church: _____
Email address _____ and/or _____

Health/ Development Background

Are you aware that your child has any of the following?

____ Allergies ____ Auditory Disorder ____ Health Concerns ____ Learning Disabilities
____ Speech Disabilities ____ Vision Concerns

If so, please explain:

Is your child potty trained? _____

Are there foods your child may NOT be given? _____

Childcare/ Education Background

Has your child attended preschool or childcare previously? _____

How long did they attend? _____

Name of previous provider: _____

Will your child need transportation from Hunteertown Elementary? _____

(Students will ride a NACS bus to Lifehouse on days they attend.)

Summer 2019 Rates

Daily Rate – \$35.00

Weekly Rate – \$160.00

Parent signature confirming weekly payment: _____ Date _____

2019-2020 School Year Rates

Elementary or Full time preschool student (8am-3pm) - \$60.00/week

In the event of a cancellation, you will be charged \$30.00 if your child attends all-day care. In the event of a delay, there will be a \$5.00 charge.

Preschool Student – \$135.00/wk or \$30.00/day

Parent signature confirming weekly payment: _____ Date _____

Registration Agreement

By signing below, I am in agreement with the following:

Payment for registration is non- refundable.

I will keep my child home if they are displaying signs of illness or communicable disease as stated in the handbook.

My child will be picked up promptly before scheduled closing of 6pm.

Late fee of \$15.00 will be added to account if invoices are not paid weekly.

Late pickup will result in an additional \$1 per minute fee after 6:00 p.m. or times indicated above.

No drop ins available.

I understand my child can only attend on the days and times registered for. I agree to pay for registered days every week regardless of child's attendance.

After 6 months of attendance, I understand there will be one week of consecutive vacation days in which an invoice will not be applied.

I will fill out the appropriate form indicating the week in which I wish to use my vacation time.

Signature: _____ Date: _____