

Duck Pond Learning Center & Nursery School Application

Child's Information:

Male _____ Female _____ Date of Birth: _____

Date of requested enrollment: _____

Last Name: _____ First Name: _____

Requested schedule (days/hours) _____

Mother's Information:

Last Name: _____ First Name: _____

Address _____

Phone #'s: (home) _____ (cell) _____ (work) _____

Email address: _____

Father's Information:

Last Name: _____ First Name: _____

Address: _____

Phone #'s (home) _____ (cell) _____ (work) _____

Email address: _____

Parent to be contacted regarding enrollment: _____

How did you hear about DPLC? _____

Has your child been in child care previously? _____

If yes, was it a positive experience? ____ Reason for leaving: _____

Parent signature: _____ Date: _____

Your application will be filed when received

*Please note: This application does not guarantee enrollment. A deposit will be taken when space becomes available and not more than 6 weeks in advance. DEPOSITS ARE NON_REFUNDABLE

8/31/06