

**AMY & KIDS CO. FAMILY CHILD CARE**  
1013 W. Oklahoma, Appleton, WI 54914, (920) 738-1698  
www.appleton-child-care.com

**Child Enrollment Application & Acceptance**

Child's Name \_\_\_\_\_

Nickname (if any) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address/es \_\_\_\_\_

Phone Number/s \_\_\_\_\_

Child lives with \_\_\_\_\_

*Parent/Guardian Information - please list each parent/guardian*

Name	Address	Phone	Email
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Most recent child care \_\_\_\_\_

(Name)	(Contact Person)	(Phone)
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Approximate days and times child care will be needed:

MONDAY	from _____	to _____
TUESDAY	from _____	to _____
WEDNESDAY	from _____	to _____
THURSDAY	from _____	to _____
FRIDAY	from _____	to _____

By signing this application I/We hereby agree to:

- Enroll this child at **AMY & KIDS CO. FAMILY CHILD CARE**, beginning on \_\_\_\_\_ (Date).
- Upon acceptance, complete, sign and return all required forms before the first day of care.
- Upon acceptance, pay the following fee/s which are non-refundable if the child is not brought for care.
  - An enrollment fee of \$25.00, due within 24 hours of acceptance.
  - A holding fee of \$\_\_\_\_\_ /week to reserve this opening. Payment begins the Tuesday after the child has been accepted for care and is due by 5:30 Tuesday each week that the opening is to be held.(See Parent Handbook for a full explanation of Enrollment and Holding Fees.)

\_\_\_\_\_  
(Parent/Guardian signature/s)

This child has been accepted for care and a place is reserved beginning on \_\_\_\_\_ (Date).

This space will be reserved until \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Amy S. Nogar, Child Care Provider)

