



BUSY BEE'S CHILD CARE CENTER, LLC

REGISTRATION FORM

CHILDS NAME: _____	TODAYS DATE: _____
HOME ADDRESS: _____	PHONE #: _____
CITY: _____ STATE _____ ZIP: _____	EMAIL: _____
PARENT/GUARDIAN NAME(S): _____	

First date of attendance: _____

Please check the program your child is enrolling for:

- _____ infant/toddler care (18 months -24 months)min 2 full days
- _____ Pre-School Child Care (Year-Round, 2 yrs. to entering K) min 2 half days or 2 full days
- _____ Pre-School Child Care: Summer Care Only min 2 half days or 2 full days
- _____ Before/After School Program (School Year, 5 to 12 yrs.)min 2 sessions per week
- _____ School-Age Program Summer (June – August)min 2 half days

PLEASE WRITE IN THE TIME YOUR CHILD WILL BE ATTENDING BUSY BEE'S:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
ARRIVAL:					
DEPARTURE:					

Please hand carry this form to Busy Bee's Child Care Center along with the appropriate registration fee(s). Registration fee(s) must be submitted with this application for enrollment. Cash or check accepted. Please make checks payable to Busy Bee's Child Care Center. **Registration fee is non-refundable.**

FAMILY & SOCIAL HISTORY

Childs Nickname (if any)

Childs Birth Date

Mother/Guardian Name

Father/Guardian Name

Married how long: _____ Living together how long: _____

Separated how long: _____ Divorced how long: _____

Step Parent in Family: Yes / No

Stepfather Name: _____ how long: _____

Stepmother Name: _____ how long: _____

Custody/visitation Agreement: (submit copies of appropriate documents for file)

Siblings of Child:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Other members of the household (include relationship & pets):

DEVELOPMENTENTAL HISTORY

Has the child had other play group experiences Y or N, Location: _____

What are the child's favorite indoor/outdoor activities:

Does the child have any special fears, Y or N, please specify:

Does the child have any issues our staff should be aware? Please Specify:

How can we best communicate with you?

Phone # _____ Email: _____ Text Message _____