



Little Highlanders Learning Center

August 2019 – June 2020

Child's Name: _____ Birthdate: _____

Address: _____

City: _____ Zip: _____ Home Phone: _____

Mother's Name _____ Father's Name: _____

Work Phone: (Mom) _____ (Dad) _____

Pager/Cell Phone: (Mom) _____ (Dad) _____

Email Address: _____

Registration Fee: \$75.00 (Must be paid at the time of registration and is non-refundable.)

Child Care Location: 861 E. Sibley St., Howell, MI 48843

Child Care Schedule: Please indicate the days you are registering for:

___ Infant Room (6 weeks- approx. 18 months old) Circle Days
M T W TH F

___ Toddler Room (approx. 18 months- 3 years old) Circle Days:
M T W TH F

___ Mixed-Age Full Day Preschool
(at least 3 years old by September 1, 2019) Circle Days:
M T W TH F

___ Four Year-Old Preschool
(at least 4 years old by September 1, 2019) Monday-Thursday - 9:15 a.m. - 4:15 p.m.
Lunch provided; Before and After Care Available

May your child be photographed for publicity materials? YES NO

By registering, you agree to abide by the policies and procedures outlined in the Parent Handbook including the following:

- Fees associated with the schedule stated above are due each Friday by 6:00 p.m.
- A \$25.00 late fee will be charged to any account not paid in full by 10:00 a.m. on Tuesday.
- You will provide diapers, wipes, lunch and snacks for your child as required.
- If you provide three weeks written notice of days off, you will not be charged for those days.
- Your child must be signed in and out on a daily basis.
- Your child's emergency card must be kept current; making changes in writing as they occur.
- Ill children must be excluded with accordance to our health policy.
- Coupons credits are available for days scheduled but not attended as outlined in the handbook. Credits must be used within 2 weeks of the absence and once your coupons have been used, payment is required for all days scheduled.
- Families enrolled in the After Care Program will be charged an after-six fee for any child not picked up by 6:00 p.m. A child may be excluded for repeated late pick-up.
- A \$25.00 fee will be charged for each returned check or declined credit card.
- If you have three returned checks or declined credit cards, all future payments must be made by money order.

(Parent Signature)

(Date)

For Office Use Only: Registration Fee Paid: (Amount) _____ (Date) _____ (Check Number) _____

Forms on File: Physical _____ Immunization Record _____ Emergency Card _____ Student Information Form _____

Return completed form to: HPS Early Childhood Programs 861 E Sibley St., Howell, MI 48843