



Application Form

Date: _____

Child's Name: _____

DOB: _____ Sex: _____

Childcare days needed: (please circle at least 3)

Monday Tuesday Wednesday Thursday Friday

Indicate drop-off & pick-up times:

M _____ T _____ W _____ Th _____ F _____

Father's Name: _____ Occupation: _____

Address: _____

City: _____ Zip: _____

Cell Phone: _____

Home Phone: _____

Work Phone: _____ Hours at Work: _____

Email Address: _____

Mother's Name: _____ Occupation: _____

Cell Phone: _____ Home Phone: _____

Work Phone: _____ Hours at Work: _____

Email Address: _____

Address (if different): _____ City: _____ Zip: _____

Please list other children in the family:

Name: _____ DOB: _____ School: _____

Name: _____ DOB: _____ School: _____

Please indicate family or guardians that are responsible for child AND authorized to pick-up:

Name: _____ Relation: _____

Phone: _____

Name: _____ Relation: _____

Phone: _____

Previous childcare experiences? If so, where: _____

Please indicate any allergies your child has: _____

Illnesses, accidents, & surgery your child has/had: _____

Consents: (do not determine acceptance)

I give permission for my child to participate in all activities at Lilac Sea Nursery at a developmentally appropriate level including, but not limited to, outdoor play, canyon hikes, gardening, and swinging. (initial)_____Yes_____No

I give permission for my child's photo to be taken. (initial)_____Yes_____No

I give permission for my child's photo to be used for Lilac Sea Nursery private newsletters/emails. (initial)_____Yes_____No

I give permission for my child's photo to be used for Lilac Sea Nursery promotional purposes, such as websites, social media and brochures. *Note: We take special care not to use pictures showing children's faces for promotional purposes.* (initial)_____Yes_____No

I give permission for EMERGENCY medical treatment or care, to be used only if I cannot be reached immediately. (initial) _____Yes_____No

Lilac Sea Nursery Family Questionnaire:

These questions are asked so that your child's caregiver might have a clearer picture of your child and their home environment in order to determine how best to serve his or her needs. Your child's admission is not dependent upon the "right" answers, but to help us work together with you to provide the best care for your child.

If there are any special circumstances about which you feel we should be aware in order to better understand your child, please communicate these to us on the bottom or backside of this questionnaire. All information is strictly confidential.

What is the primary reason(s) you are drawn to our nature/play-based program?

How did you hear about Lilac Sea?

What personality traits do you think are prominent in your child?

What kinds of activities does your child enjoy most?

What activities does your family do together?

Does your child take part in any other lessons, activities or classes on a regular basis? (Please specify)

Does your child nap? If so, at what time(s) and for how long?

Does your child use a computer or smartphone/tablet? How often?

Does your child watch T.V. or movies? Which programs?

How often? How long? When?

Does your child engage in daily outdoor play time? How long?

Does your child have pets?

Does your child have friends that he/she plays with regularly? Ages?

Is there a special doll, toy or blanket?

Does your child have any fears?

If there is anything else that you feel is pertinent to your child's biography that has not been covered (i.e. special abilities, physical characteristics, behavioral, medical or emotional concerns, unusual family situation), please note here:

About our Contract

Please initial the following statements:

I understand that the full monthly tuition is due even if there are planned or unplanned absences or vacations. _____

I understand that the \$250 yearly registration and materials fee is due upon my child's acceptance. The first month's tuition is due on my child's first day of attendance. _____

I understand that tuition is due in full on the first of each month. _____

I understand that if tuition is paid on the 3rd of the month or later, a \$50 late fee will be added to the amount. _____

I understand that my one month's tuition deposit will be applied to the last month of the school year or carried over to the next school year if my child is re-enrolling. If I discontinue my child's enrollment before the end of the school year, my deposit will be forfeited. _____

Parent/Guardian Signature: _____

Date: _____