

Grandma's House Day Care Centers, Inc.

Registration Form

Center: _____ Tosa _____ Highland _____ Transfer to: _____
 _____ Brookfield _____ Hartland _____

Family Name _____ **Start Date** _____
Address _____ **City, State, Zip** _____
Home Phone _____ **Email Address** _____
Parent Name _____ **Parent Phone** _____
Parent Name _____ **Parent Phone** _____
Child _____ **Birthday/Due Date** _____
Child _____ **Birthday/Due Date** _____
Child _____ **Birthday/Due Date** _____

How did you hear about us? _____

Attendance:

	Monday	Tuesday	Wednesday	Thursday	Friday
Drop off					
Pick up					

Completion of this form along with the registration fee will hold your child's spot.

One Time – Non-refundable Family Registration Fee \$100.00

For Office Use

W-2 Authorization Verified online: _____ Dates: _____ Rate: \$ _____
 Registration Fee paid Check # _____ Rec'd By: _____ Date Rec'd: _____
 Initial Confirmation Date: _____
 Paperwork Given/Sent Date: _____ Door Code # _____ Date Activated/Issued: _____

Notes: _____