

Grandma's House Day Care Centers, Inc.

Registration Form

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

Family Name _____ Start Date _____

Address _____ Home Phone _____

Parent Name _____ Parent Name _____

Parent Email _____ Parent Email _____

Parent Phone _____ 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

Please make checks payable to *Grandma's House*

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: _____