

Caterpillar Development Center

890 Vee Street
Biloxi, MS 39532
228-385-3900

Enrollment Application

Parent/Guardian Information

Registration Date: _____

Mother/Guardian First Name: _____ M.I. ____ Last Name: _____

Address: _____

Occupation: _____ Home Phone: () _____

Employed By: _____ Office Phone: () _____

Work Address: _____ Work Hours: _____ Cell Phone: () _____

Custodial Parent (If married, mark both parents)

Email: _____ Driver's License #: _____

Marital Status: Married Single Divorced Separated Widowed Other _____

Father/Guardian First Name: _____ M.I. ____ Last Name: _____

Address: _____

Occupation: _____ Home Phone: () _____

Employed By: _____ Office Phone: () _____

Work Address: _____ Work Hours: _____ Cell Phone: () _____

Custodial Parent (If married, mark both parents) Father's SS#: _____

Email: _____ Driver's License #: _____

Marital Status: Married Single Divorced Separated Widowed Other _____

Child Information

First Name: _____ M.I. ____ Last Name: _____

Name child prefers to be called: _____ Grade/Class: _____

Child's Address: _____

Gender: Male Female Date of Birth: _____ Child's S.S. #: _____

List any existing medical conditions, medication and/or special attention your child may require?

Allergies: _____

Pediatrician's Name: _____ Phone: () _____

Address: _____

Hours of care needed: _____ Days needed M__T__W__TH__F__

Meals needed: breakfast__ lunch__ P.M. snack__

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EMERGENCY MEDICAL TREATMENT

In the event of an accident or emergency illness, Caterpillar Development Center staff has my permission to administer or seek medical treatment for my child. I hereby release Caterpillar Development Center and the staff from liability resulting from accident or emergency treatment. ____ (*initial*)
If not, what would you like us to do? _____

TOILET TRAINING

My child *is* ____ *is not* ____ toilet trained at the time of enrollment. Training began on _____ . ____ (*initial*)

BREAKFAST

We serve breakfast. A morning breakfast is served at approximately 8:00am each morning. No food from outside the center will be allowed except for parties. ____ (*initial*)

PHOTOGRAPHY PERMISSION

I do ____ *I do not* ____ give my permission for my child to be photographed or videotaped. This **does** include other parents taking pictures at birthday parties or other special events. Media coverage or posting pictures and/or video tape the Caterpillar Development Center website, Facebook business page, paid advertisement and and/or any display within the facility. ____ (*initial*)

POLICY BOOK

I have received the information concerning the centers policies and procedures and a copy of The Child Care Summary for Parents. ____ (*initial*)

WITHDRAWAL

I understand that a two week notice must be given when I withdraw my child from the center or I will be required to pay a "no notice" fee that is equal to one (1) week of tuition. ____ (*initial*)

TUITION/PAYMENT INFORMATION

Registration fe and first week tuition is paid during registration. Tuition is due every Friday for the following week. If tuition is not paid, there is a \$5 late fee charge on Monday, additional charge on Tuesday, and suspension on Wednesday. Caterpillar Development Center accepts cash or personal checks. If personal checks are returned, there will be a \$30 fee added in tuition.

I also understand child care services provided for my child may be suspended by Caterpillar Development Center at any time for failure to keep my Caterpillar Development Center enrollment account current. ____ (*initial*)

If tuition payment is the responsibility of an adult other than the parent or guardian listed above, please provide contact information below:

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Emergency Contacts & Authorized Pickup Persons (other than parents):

1st Contact/Pick up Name: _____ Phone: _____

Relationship to the Child: _____

2nd Contact/Pick up Name: _____ Phone: _____

Relationship to the Child: _____

3rd Contact/Pick up Name: _____ Phone: _____

Relationship to the Child: _____

Additional Comments & Information:

Is there is any other information that that would be helpful to our management and teaching staff?

Signature:

Parent's Signature: _____ Date: _____

Thank You!

FOR OFFICE USE ONLY

Date of Admission: _____ Class _____ Tuition Amount: _____

Date of Withdrawal: _____ Reason for Withdrawal: _____