Infant Toddler Children's Center
Childhood lives here.

FOR OFFICE USE ONLY

Infant/Toddlers: _____Pre-School:_____

Date Received: _____

Re-Enrollment Fee Received: _____

Application for School Year: 2024-2025

CHILD'S NAME _____ **SEX**_____
First Middle Last

BIRTH DATE_____/_____/_____ **AGE AS OF SEPTEMBER 1, 2024** _____ / _____
Month Day Year Years Months

PARENT/ GUARDIAN #1

NAME _____

STREET_____

CITY/ST/ZIP _____

TELEPHONE(S) home # _____

Cell # or work # _____

E-mail: _____@_____

PARENT/GUARDIAN #2

NAME_____

STREET_____

CITY/ST/ZIP _____

TELEPHONE(S) home #_____

Cell # or work #_____

E-mail: _____@_____

Hours available: 7:45 AM-5:00 PM. No arrivals or departures between 1:00 and 3:00 PM. **Preschoolers must arrive by 9:00AM.** (All daily schedules must be in full or half hour increments, i.e. 8:00-4:30, 9:00-5:00, etc. (7:45 – 8:00 is the only ¼ hour increment) **Infants have a minimum of 30 hours per week. YT-PSII have a minimum of 20 hours per week.**

Time Requested: i.e. 8-5M_____T _____W _____TH _____F _____

LENGTH OF YEAR REQUESTED:

- ☐ **School year (Aug. 28, 2023 – June 28, 2024)**
- ☐ **Full Year (Aug. 28, 2023 – Aug. 9, 2024)**

Please submit with a $35.00 application fee per family. **(Check or cash acceptable, make check out to ITC)**

○ **We already submitted an application on _____**

Parent/Legal Guardian Signature(s):_____ Date: _____
_____