

# Kidnect

Child Development, LLC

## ***Application for Enrollment***

### **Child Information**

Child's full name \_\_\_\_\_ Nickname \_\_\_\_\_ Age \_\_\_\_\_

Date of birth \_\_\_/\_\_\_/\_\_\_ Sex \_\_\_ Child's Address \_\_\_\_\_

Tel. # \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Daily Arrival Time \_\_\_\_\_ Departure Time \_\_\_\_\_

### **1. Mother/ Guardian**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Business Phone \_\_\_\_\_

### **2. Father/ Guardian**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Place of Employment \_\_\_\_\_ Business Phone \_\_\_\_\_

### **Family Information**

Child lives with       Mother       Stepmother       Legal Guardian

Father       Stepfather       Grandparent

Are you a member of Beautiful Savior Lutheran Church?       yes       no

Do you currently have a church home?       yes       no

**Estimated Start Date** \_\_\_\_\_