

KIDS INC.

6:30 AM – 6:00 PM Kind – 8th Grade

298-9256 7172 N. Cedar Ave., Fresno, CA 93720 Lic. #103801365

KIDS INC. FAMILY REGISTRATION FORM

REGISTRATION FEES:
(Per Child, Non-Refundable)

_____ Transitional Kindergarten \$20.00
_____ Full Day _____ Half Day
_____ Extended Care \$20.00
_____ Before only _____ After only _____ Before & After

PLEASE LIST HOURS OF ATTENDANCE FOR EACH CHILD

Child's Name	Birthdate	Grade	Days of Attendance					School	Plan
_____	_____	_____	M_____	T_____	W_____	Th_____	F_____	_____	_____
_____	_____	_____	M_____	T_____	W_____	Th_____	F_____	_____	_____
_____	_____	_____	M_____	T_____	W_____	Th_____	F_____	_____	_____

FATHER/STEP-FATHER/GUARDIAN (circle one)

NAME: First Middle Last Telephone Cell Pager

ADDRESS: Apt. City Zip

Occupation Name of Employer Telephone Ext.

MOTHER/STEP-MOTHER/GUARDIAN (circle one)

NAME: First Middle Last Telephone Cell Pager

ADDRESS: Apt. City Zip

Occupation Name of Employer Telephone Ext.

CONTRACT AGREEMENT

I will be responsible for payment of weekly tuition including all fees and I understand that my children are enrolling for the entire school year. Vacation time is given during Thanksgiving (Fall), Christmas (Winter) & Easter (Spring) Breaks. Tuition is due in advance of services and a late fee of \$5.00 per day will be charged after the first scheduled day of each week. Drop In care is paid the day of service. Credit is not given for absences. A \$20.00 NSF fee will be charged for returned checks.

RESPONSIBLE PARTY IF DIFFERENT FROM PARENT:

NAME: First Middle Last Telephone Cell Pager

ADDRESS: Apt. City Zip

Occupation Name of Employer Telephone Ext.

I HEREBY CONFIRM THAT ALL INFORMATION GIVEN IS CURRENT AND CORRECT.

SIGNATURE RELATIONSHIP DATE

SEND REGISTRATION FORM AND CHECK TO: KIDS INC. 7172 N. Cedar Ave. Fresno, CA 93720

OFFICE USE: STARTING DATE _____ PRE-KINDERGARTEN \$ _____ # _____
EXTENDED CARE \$ _____ # _____