

## **ADMISSION POLICY**

- Families who are interested in The Children's Center may visit the web-site at www.mckaychildcenter.com for registration information.
- After reviewing the information, the parents/guardians may tour the facility on the 2nd Tuesday morning of the month at 9:00 a.m. during the school year (Oct May).
- The parents/guardians may then complete an application form and return it to the Center along with a \$35.00 non-refundable processing fee per child. At this time, the child's name will be placed on a wait list. Priority is given to siblings, however, all applicants are considered in order of the date of application.
- When a child is offered placement in the Center, the parents/guardians will need to sign a contract and return it with a non-refundable deposit to secure a spot. The contract offers a variety of payment plans from which to choose.
- All decisions regarding acceptance are made on a space availability basis and at the discretion of the Director. The Children's Center has a strict policy of non-discrimination toward students and staff. A separate application should be completed for each child for whom you are requesting admission.

General Information						
School Year	Date of Application					
Information about the Stu	udent					
Student's Last Name	Student's First Name (name you want us to teach your child to write on their papers)	Student's Date of Birth				
Gender ☐ Male ☐ Female	Current School	Home Telephone Number				
Home Address	City	State Zip Code				

Directions: Please print clearly. A non-refundable application fee of \$35.00 per child, payable to "The Children's Center", must accompany this application.

Please fill out other side→

Parent #1		F	First Name		E-mail	E-mail Address		
Home Address if different than student's			City		State		Zip Code	
Home Phone	Work	Phone	Cell Phone			Oth	er Telephone Numbers	
Occupation		Name and Ad	ldress of	ress of Employer				
Information about the Student's Mother or Parent #2								
Parent #2		F	First Name		E-mail	E-mail Address		
Home Address			City		State		Zip Code	
Home Phone	Work	Phone		Cell Phone		Other Telephone Numbers		
Occupation		Name and Address of Employer						
Information about Brothers a	and Sis	ters						
Name			Age	Age School or College			ollege	
Name			Age		School	School or College		
Name			Age		School	School or College		
Name			Age	Age School or Colle		ollege		
Acknowledgement and Signature								
I understand that by submission of this application and <b>check for \$35.00</b> , my child will be considered for admission to The Children's Center. I further understand that should my child be offered a space at the school, and I/we decline, our \$35 application fee will be forfeited.								
Parent/Guardian Signature				Date	Date			

For office use only						
Date Received	Check#	Amount				