



APPLICATION FOR ENROLLMENT

For children ages 6 weeks – 4 years: There is a one-time \$90.00 non-refundable registration fee payable at the time of application. This fee is to help defray the cost of insurance for the child, processing of the application and filling out necessary forms to comply with licensing requirements.

For 5-12 year old children: There is an annual \$50.00 non-refundable activity fee for the summer program payable at the time of application. This fee is to help defray the cost of field trips and the transportation to and from those field trips. Families already enrolled are charged this fee annually in this first week of the summer program.

INFORMATION ON PARENTS/GUARDIANS:

Mother's Contact Information

Name of Mother _____ Home Phone _____
Mother's Address _____ City _____ Zip _____
Place of Employment or school _____ Work Phone _____
Address _____
Hours of Work / School _____
Cell Phone: _____ Email Address: _____

Father's Contact Information

Name of Father _____ Home Phone _____
Father's Address _____ City _____ Zip _____
Place of Employment or school _____ Work Phone _____
Address _____
Hours of Work / School _____
Cell Phone: _____ Email Address: _____

INFORMATION ON CHILD:

Full Name _____ Date of Birth _____

List any allergies or physical/medical conditions we should know about:

First Day of Attendance _____

Termination Date (if temporarily attending): _____

Please indicate days of the week and times that care is needed:

<u>DAYS</u>	<u>HOURS</u>
_____ MONDAY	_____ TO _____
_____ TUESDAY	_____ TO _____
_____ WEDNESDAY	_____ TO _____
_____ THURSDAY	_____ TO _____
_____ FRIDAY	_____ TO _____

Please list any notes regarding schedule flexibility or special scheduling needs:

FINANCIAL AGREEMENTS:

Please read and initial:

_____ I understand that I will be billed every two weeks. My bill will be in my family cubby on the first day of that week and my payment is due by the end of business that following Thursday. I understand that a fee of \$5.00 per day will be assessed for each day my payment is late. I also understand that I must inform the director in the case that my payment will be late. I understand that repeated lateness paying my bill may result in the termination of my child's space at Renaissance following repeated warnings.

Read and initial here if you are paying for daycare without the help of any government assistance programs:

_____ I understand that my weekly fee is _____. I agree to assume full financial responsibility for all childcare fees and will make regular payments as indicated in the center's Fee Payment Policy.

Read and initial here if you will be receiving county-paid W2 assistance paying for daycare:

_____ I will receive county assistance. I agree to be responsible for my portion of the fee (if any) and will pay those fees in accordance with the agency's policy. If I become ineligible for county Assistance, I will notify the center immediately and will make arrangements either to pay the fees privately or to withdraw my child.

Sign below regardless of whether you will be receiving government assistance paying for childcare or not. Your signature indicates you agree to abide by the Fee Payment Policy.

_____ Date

_____ Signature of Parent/Guardian

1306 N Marshall Street Milwaukee, Wisconsin 53202 414-276-1133

Parent Responsibilities:

Please read and initial next to each section below:

- _____ I understand that I must give the center a two week notice of my child's withdrawal from the center in writing using the withdrawal form available in the front foyer. I understand that I will be charged and required to pay for two weeks of care if I withdrawal my child and fail to notify the center.
- _____ I understand that I am bound to my chosen and approved regular weekly schedule. I will be charged for all scheduled days, whether my child is in attendance or not.
- _____ I understand that I will be granted uncharged vacation days. The number of vacation days I receive annually will be equal to two weeks of my child's regular schedule. I understand that notice of these days must be given at least ten days in advance. I also understand that vacation days cannot be used during the final two weeks of my child's enrollment at the center. I understand that vacation days are renewed on the anniversary of my child's first day of attendance at Renaissance.
- _____ I understand that it is the responsibility of any individual dropping off or picking up my child to sign my child in on the classroom's clipboard in accordance with State of Wisconsin law HFS 46.05(3)(f).
- _____ I understand that it is my responsibility to maintain a stock of diapers (if needed), wipes (if needed), and a comfortable, seasonally appropriate change of clothes for my child at the center at all times. Soiled and dirty clothing must be taken home and washed by me and the center's stock replaced in the meantime.
- _____ I understand that I will be charged for all scheduled days of attendance including holidays on which Renaissance is closed.
- _____ I have read and understand all of the policies and philosophies outlined in the parent handbook. I also agree to abide by all family rules as stated in the parent handbook.
- _____ I understand that if I am enrolling my child for daycare more than 30 days in advance of my child's first day of attendance that I must pay for my child's first week of childcare in addition to the registration fee when submitting this application or my child's space will not be reserved. I understand that this payment is non-refundable but will pay for my child's first week of daycare when care does begin. If I later decide that my child will not attend Renaissance Child Development Center I understand that I am forfeiting that payment plus my registration fee to Renaissance.
- _____ I am aware that I have the option of making my childcare payments automatically through the use of automatically recurring checking or savings withdrawals or through the use of automatically recurring credit card charges. I understand that there may be a fee associated with credit card payments but there is no fee for automatic checking or savings account withdrawals. (See the director for details)
- _____ I understand if my child is picked up after the designated closing time, a "Late Fee" of \$1.00 per minute will be assessed and be paid by the next childcare bill due date.