



**THANK YOU** for your interest in Children's Learning Place.  
Please read and fill out the attached application to be considered for enrollment.

### Enrollment

Penquins Room	ages 6 weeks – 12 months	Grapes Room	ages 18 months – 2 years
Koalas Room	ages 6 weeks – 12 months	Blueberries Room	ages 2 years
Pandas Room	ages 12 months – 15 months	Cherries Room	ages 2 years – 3 years
Chimps Room	ages 15 months – 2 years	Kiwis Room	ages 3 years – 6 years

### Hours of Operation:

5 days a week, Monday through Friday; 7:00 am to 6:30 pm

**Admission policy:** All applications are welcome. However, admission is restricted to interview acceptance, space availability and completion of the enrollment application.

Children's Learning Place is operated on a non-discriminatory basis, providing equal treatment and access to services without regard to race, color, religion, national origin, or ancestry. Corporal punishment is not allowed.

**Fee schedule:** increased annually in September for a cost of living increase. (Fees below represent September 2010 — August 2011)

#### Infant/Toddler Rates-Under the age of 2

- 2 Days \$1213.33 monthly or \$280.00 weekly Mon/Tues or Thurs/Fri options
- 3 Days \$1581.67 monthly or \$365.00 weekly Mon/Tues/Wed or Wed/Thurs/Fri
- 5 Days \$1885.00 monthly or \$435.00 weekly

#### Toddler/Preschooler-Over the age of 2

- 2 Days \$940.33 monthly or \$217.00 weekly Mon/Tues or Thurs/Fri options
- 3 Days \$1226.33 monthly or \$283.00 weekly Mon/Tues/Wed or Wed/Thurs/Fri
- 5 Days 1473.33 monthly or \$340.00 weekly

### There is also:

A two-week security deposit to cover their childcare cost for the final two weeks, *paid when you receive confirmation of space availability. No interest will be paid.*

### Holidays

School is closed for major national holidays as will be outlined in your Enrollment Package upon acceptance. These dates will be listed in the CLP Handbook.

### Admission procedure

Complete (in specific detail) the attached Application for Enrollment Form. Mail or drop off your application to the center. Participate in an interview with a CLP staff member and attend a scheduled tour. You will be contacted when/if enrollment becomes available. Upon confirmation of enrollment, immediately submit your security deposit to secure your child's space at Children's Learning Place. Your child's Director will set up a time to meet. At this meeting you will receive your parent handbook and your child's enrollment packet. In the event of your child's withdrawal, we ask that you provide your Program Director written notice at least 30 days prior to the withdrawal.

### Enrollment cancellations

CLP reserves the right to cancel enrollment of a child for any of the following reasons:

- Non-payment of fees and charges
- Not observing CLP rules and regulations
- Not completing and returning all required forms by the due date
- When the school is not able to meet a child's needs.

**Keep this copy for your records and return the Application Enrollment Form to CLP**



**Children's  
LEARNING PLACE**  
**APPLICATION FOR ENROLLMENT**  
(One application per child)

Child's Name \_\_\_\_\_ Gender: Male  Female  Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Parents are: Living together  Divorced  Separated  Widowed   
Child resides with: Parents  Guardian  Mother  Father

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**Parent/Guardian 1:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ How long? \_\_\_\_\_ Own  Rent   
Occupation: \_\_\_\_\_ Salary \_\_\_\_\_ How long? \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Direct Work Phone \_\_\_\_\_  
Email address: \_\_\_\_\_  
Name of employer: \_\_\_\_\_  
Employers address: \_\_\_\_\_

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**Parent/Guardian 2:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ How long? \_\_\_\_\_ Own  Rent   
Occupation: \_\_\_\_\_ Salary \_\_\_\_\_ How long? \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Direct Work Phone \_\_\_\_\_  
Email address: \_\_\_\_\_  
Name of employer: \_\_\_\_\_  
Employers address: \_\_\_\_\_

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List other children's names and ages: \_\_\_\_\_

I would like to enroll my child in CLP beginning: \_\_\_\_\_

Days child will attend: Mon  Tue  Wed  Thu  Fri

Expected Arrival Time: \_\_\_\_\_ Expected Departed Time: \_\_\_\_\_

Previous school \_\_\_\_\_ Location \_\_\_\_\_

How long at previous school? \_\_\_\_\_

Please list any important information about your child that would be helpful to us: (Include previous school experience, any special testing, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**Health**

Physician's name \_\_\_\_\_ Phone number \_\_\_\_\_

What communicable diseases has your child had? (Check all that apply)

Measles  Mumps  Measles (3 day)  Chicken Pox

Other (Specify) \_\_\_\_\_

Any serious illness or hospitalization? (Explain) \_\_\_\_\_

Any physical Disabilities? (What?) \_\_\_\_\_

Any known allergies? (Please list) \_\_\_\_\_

Any medications given regularly? (What/How often?) \_\_\_\_\_

Any special needs? (Explain) \_\_\_\_\_

What are your educational priorities for your child? \_\_\_\_\_

Why have you chosen CLP? \_\_\_\_\_

How did you hear about CLP? \_\_\_\_\_

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**Parent Participation:** We like our parents to be involved in the care and schooling at CLP.

To what extent and how often would you be able to participate in/with:

Parent Committees \_\_\_\_\_

Special Events \_\_\_\_\_

Visiting and spending time at CLP during the day \_\_\_\_\_

Donations, fundraising, other volunteer interests \_\_\_\_\_

Comments \_\_\_\_\_

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Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_ Relationship to child \_\_\_\_\_