

The Bay Kids, LLC

12990 Monticello Dr
Mail to: PO Box 2179
Lusby, MD 20657
410-231-2131



Enrollment Waiting List

Updated
January 2023

David C Houghton



TOUR IS REQUIRED

An appointment for a tour of our facility is required to be "on the list" It's how we know you're serious.

DEPOSIT INFORMATION

Deposit amount \$ _____

Equal to one week's tuition for assigned classroom * Applies to registration.

2023 "WAITING LIST" CHILD ENROLLMENT FORM

If child is enrolled, this form must be accompanied by a contract

SA SP

Parent/Custodian Full Name: _____

Address 1: _____

Address 2: _____

City, ST, ZIP Phone _____ Phone _____

Email Address (please include and print clearly): _____

Please use the email address that will be used for us to send important notices, documents, etc.

We want to accommodate all families with the childcare they need. Please check which program you are requesting for your child. (Each child requires a separate contract upon enrollment)

Full-time (M-F) Infant Care Ages 6-wk & up
(Infant Room hours are strictly 7:00 a.m. – 5:00 p.m. Please check Parent Handbook for details)

Full-time (M-F) Preschool Care Ages 2-5

Part-time (select) Preschool Care Ages 2-5 Monday Tuesday Wednesday Thursday Friday
Specific Hours Requested No Yes (indicate)

Pre-K (M-F) AM Care PM Care

Before Care After Care Before AND After Care for School Age Children

Child's Name _____ Current Age _____ Date of Birth _____

Known Allergies/Comments and Concerns: _____

FAMILY INFORMATION

(Check Primary Contact)

Father's Name: _____ Home Phone: _____ Primary

Place of Employment: _____ Work Phone: _____ Primary

Mother's Name: _____ Home Phone: _____ Primary

Place of Employment: _____ Work Phone: _____ Primary

Child resides with: Both Parents Father Mother Other: _____

Parents are: Married Separated Divorced Other: _____



THE BAY KIDS, LLC



12990 Monticello Drive - Lusby, MD 20657 - Office: 410-231-2131 - FAX: 410-231-2158
MSDE/OCC License Number - 250638

PARENT OR LEGAL PARENT/GAURDIAN WITH CUSTODY OF CHILD NAMED ABOVE MUST SIGN

CHECK HERE IF THERE ARE ADDITIONAL CHILDREN ENROLLING

(Please use additional form(s))

*Please be sure to ask Director about our **Sibling Discount!!***

Signature of Applicant/Parent, or Legal Guardian

Date

**A payment equal to one week's tuition for assigned classroom is required to keep your place on the Waiting List. This deposit will be applied to provide care and guarantees the last week's tuition payment for when a two-week notice of termination is not submitted to the Director. If enrollment is declined by customer for any reason, a 50% refund will be provided for holding seat for your child.*

Thank you,

Shannon O'Steen, Director

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