



PARENT CONTRACT PAGE

We would like to thank you for choosing Little Miracles and assure you that we have a commitment to all parents and children enrolled in our center. By signing this contract page, you have read, understood, and agreed to follow our center's policies and procedures stated in the Parent Handbook. This contract is to secure your child(ren)'s spot with the intent of enrolling on the start date as stated below.

Child Information:

Child's Full Name: _____ **Child's Date of Birth:** _____

(if your child is not born yet, what is the estimated due date): _____

Child's Start Date: _____

Child's Full Name: _____ **Child's Date of Birth:** _____

(if your child is not born yet, what is the estimated due date): _____

Child's Start Date: _____

Child's Full Name: _____ **Child's Date of Birth:** _____

(if your child is not born yet, what is the estimated due date): _____

Child's Start Date: _____

Child's Full Name: _____ **Child's Date of Birth:** _____

(if your child is not born yet, what is the estimated due date): _____

Child's Start Date: _____

Parent/Guardian Information:

Parent/Guardian Name: _____

Address: _____

Phone: (Cell): _____ Email Address: _____

Parent/Guardian Signature: _____

Parent/Guardian Name: _____

Address: _____

Phone: (Cell): _____ Email Address: _____

Parent/Guardian Signature: _____

Registration Fee:

_____ \$100 Single Child Registration Fee

_____ \$150 Multi Child Registration Fee

Infant Security Deposit:

_____ \$200 Infant Security Deposit