Child's First Name: Click here to enter text. Child’s Last Name: Click here to enter text.

Date of Birth: Click here to enter a date.

Address: Click here to enter text. Home #: Click here to enter text.

*Options for children not as yet in school; infants are only full-week, full-time:*

 [ ]  Full-day, full-week care: 7:30 am. to 6:00 pm., Monday to Friday

 [ ]  Full-day, part-week care: Only applies to Toddlers and Preschool

 please indicate your preferred days: Click here to enter text.

*Kindergarten and school-age care options are all full-week, before and after school:*

Kindergarten [ ]  Frankland or [ ]  Jackman or [ ]  Withrow

Grade 1 and up [ ]  Frankland or [ ]  Jackman or [ ]  Withrow

Will you be applying for a fee subsidy through the City of Toronto? [ ]  Yes [ ]  No

Describe your child's health conditions, allergies and diet restrictions: Click here to enter text.

Parent One Parent Two

Name:Click here to enter text. Name: Click here to enter text.

Phone #:Click here to enter text. Phone #: Click here to enter text.

E-mail:Click here to enter text. E-mail: Click here to enter text.

Children’s Circle Daycare will withdraw the current months fees on the 1st business day of the month from the bank account indicated on the Pre-Authorized Debit Agreement. Parents with children on subsidy are required to pay their daily rate at all times while their child is enrolled at Children's Circle Daycare. We require four weeks of paid notice if you are withdrawing your child from care.

For Office Use Only **Date of Child's Birth: (day month year)**

 Date Applied: Date Filed: Date Care Required:

 **Health Plan required: □ yes □ no** Visiting Days: Start Date: Fee: