## Honey Brook Early Learning Center 1099 Maple St Honey Brook, Pa 19344 Phone: 610-273-1200

## APPLICATION FOR CHILDCARE

Child's Name:	Birthdate:	Weeks Premature:
Address:		
Mother's Name or Guardian:		Tel. #
Mother's most used email:		
Address:		C#
Father's Name or Guardian:		Tel. #
Father's most used email:		
Address:		C#
Special health considerations:		
Questions/concerns about your child's dev	elopment:	
Has your child been in child care before? V	Vhen? Where?	
Please check preferences: Daycare: *A family meeting will be a line of the second seco	or School Age Program offered within the first 45 days of enrollmen  Please identify arrival and departure times Monday to Tuesday to Wednesday to Thursday to Friday to	nt*
Please return this form with regi Parent Signature:	**Please check current tuition schedule for prices** stration fee to: Honey Brook Early Learning Center, 1099 Ma  Ith forms must be submitted to center upon child's admission Staff will fill in below when registration is paid:	aple St, Honey Brook, PA 19344 Date:
Registration fee	Start will fill in below when registration is paid:  Ck #: Today's date:	Start date:
	Today 3 date.	