

Spots & Stripes Early Learning Center

Application for Child Enrollment

APPLICATION DATE

DATE OF DESIRED ENROLLMENT

CHILD INFORMATION

Child's Full Name

Nickname

Birth date or expected due date

Tentative
Schedule

Mon	Tues	Wed	Thurs	Fri

PARENT INFORMATION

Parent/Guardian(s) Name and Relation

Address

(Street)

(City)

(Zip Code)

Phone

How did you hear about us?

Referring Family

Additional Questions/Concerns: