

ENROLLMENT APPLICATION

TODAY'S DATE _____

The Early Education Center Kailua Kapolei Ko Olina Ocean Pointe

Please enclose a \$30 processing fee for each child with the enrollment application.

CHILD'S NAME _____
Last
First
Middle
Preferred

SEX _____ BIRTHDATE ____ / ____ / ____ CHILD'S SS# XXX-XX-____ PHONE _____

ADDRESS _____
Street
City
Zip Code

Parent's/ Guardian's Information

Natural Legal Guardian
 Step Other _____

Parent's/ Guardian's Information

Natural Legal Guardian
 Step Other _____

NAME _____

NAME _____

SS# XXX-XX-_____

SS# XXX-XX-_____

ADDRESS _____

ADDRESS _____

OCCUPATION _____

OCCUPATION _____

EMPLOYER _____

EMPLOYER _____

ADDRESS _____

ADDRESS _____

Are you an Emergency Required Worker? Yes No

Are you an Emergency Required Worker? Yes No

WORK PHONE _____

WORK PHONE _____

CELL PHONE _____

CELL PHONE _____

EMAIL ADDRESS _____

EMAIL ADDRESS _____

LEGAL GUARDIAN'S NAME (Other than parent) _____

ADDRESS _____

PHONE _____

LIST PERSON'S (other than parent or guardian) WHO ARE AUTHORIZED TO PICK UP YOUR CHILD FROM SCHOOL

1. Name _____

Relationship _____

Address _____

Phone _____

2. Name _____

Relationship _____

Address _____

Phone _____

3. Name _____

Relationship _____

Address _____

Phone _____

LIST FAMILY MEMBERS IN THE HOME (if additional space is needed, attach sheet to application)

1. Name _____

Relationship _____ Age _____

2. Name _____

Relationship _____ Age _____

3. Name _____

Relationship _____ Age _____

I HEARD ABOUT SEAGULL SCHOOLS: Yellow Pages Friend Advertisement (Newspaper/Magazine)
(Please check all that apply) Referral Internet Other _____

MY REQUESTED START DATE IS _____. I UNDERSTAND I WILL BE CONTACTED WHEN THERE IS A SPACE FOR MY CHILD. ENROLLMENT BETWEEN OCTOBER AND MAY IS LIMITED.

Parent/Guardian's Signature _____

FOR OFFICE USE ONLY			DATE	INITIAL	CHK/REF#	AMOUNT
START DATE		APPLICATION FEE				
CLASS		DEPOSIT				
COPY (BUS.OFC)	DATE					
	INITIAL					
FULL TIME		FIRST MONTH'S TUITION				
PART TIME		COMPREHENSIVE FEE				
					TOTAL	