



(785) 776-2162 | 2711 Amherst Ave. Manhattan, KS 66502 | livingwordchurchelc@gmail.com

Application for Enrollment - Toddler

Instructions:

- Once completed, drop-off, mail, or scan and email application to center.
- Payments accepted via cash or check. Make checks payable to Living Word Early Learning Center.
- Note: Enrollment is open year-round depending on current openings. We accept children aged 12 months/walking to 2.5 years in our toddler program. *Please see Preschool Application for children 2.5yrs-6yrs.*

Child Information

Last Name	First Name	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Address	Birthday	Age of Child	

Parent/Guardian Information

1. Last Name	First Name	Email
Address	Cell Phone	Work Phone

2. Last Name	First Name	Email
Address	Cell Phone	Work Phone

Local Emergency Contact Information

1. Last Name	First Name	Address
		Phone Number
2. Last Name	First Name	Address
		Phone Number



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Our toddler room has full time spots only. *Our Preschool Program has full time and part week options available.* Please indicate your choice of payment option below. Tuition is due on the 1st and 16th of each month.

Rates

Full Time:

Status	Days	Hours	Monthly Rate	Bi-Monthly Rate	✓
Full Time	Mon-Fri	7am-5:30pm	\$935	\$467.50	<input type="checkbox"/>

Estimated Start Date: _____

Approximate Drop-Off Time: _____

Approximate Pick-Up Time: _____

*We accept DCF and Raising Riley Scholarships.

*Ask about our multi-child discount!

Requirements Upon Enrollment

1. \$30.00 non-refundable application fee per family
2. Deposit of first 2 weeks of care paid prior to start date. This amount will be credited towards your first month's tuition. Once the application fee and deposit are processed, your child's spot will be held until their approved start date.

Note: Deposits are not required to be put on our waiting list. A deposit will be requested once a spot becomes available.

3. Cash or Checks made payable to Living Word Early Learning Center
4. A completed Registration Packet will need to be turned in at least three days prior to your child's approved start date.

I/We choose to pay: Monthly Bi-Monthly

Financial Agreement between LWELC and Parents of LWELC Children



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I, the parent/legal guardian of _____ (child's name) agree to the following terms of enrollment.

I agree to read the LWELC Parent Handbook (a hard copy will be provided upon request) and follow the center's policies.

I agree to pay the enrollment fee at the time of submitting the enrollment form.

I agree to pay 2 weeks tuition to secure my child's spot at LWELC. This money will be applied towards your child's first month's tuition.

I agree to give at least 2 weeks advance notice prior to the termination of my child's enrollment in LWELC. If no notice is given and no arrangements have been made with LWELC, you will be billed for the final 2 weeks' tuition.

I give permission to LWELC staff to call my listed Emergency Contacts if they are not able to reach me.

Parent's Name Parent's Signature/Date

Provider's Name Provider's Signature/Date

Office Use Only: **Start Date:** _____ **End Date:** _____