

**OCCASIONAL KID CARE PROGRAM
Registration Form for OK CARE**



Child's Name _____ Male Female

Date of Birth _____

Address _____

Home Phone _____

Mother's Name _____ Phone # _____

Father's Name _____ Phone # _____

How did you hear about Learn & Play? _____

Interested in Day(s) _____ **Time(s)** _____

If possible, please notify the Director no later than 3:00 pm the day before desired service.

Nonrefundable Yearly Registration Fee: \$35.00 Cash _____

Check # _____

**Hourly Fee is \$10.00 for one hour or any part thereof.
Payment is due the day the service is rendered.**

Parent's Signature _____ Date _____

Parent's Signature _____ Date _____

Collected By _____ Date _____