

Children's Center of Lexington 1580 Mass. Ave, Lexington, MA 02420

APPLICATION

SCHOOL YEAR 2023-24

PERSONAL INFORMATION

| Child's Name | : |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Nickname | : |
| Birth date | Age on : 9/1/23 |
| Address | ÷ 1725 |
| Phone Number | : Place of Birth : |
| FAMILY IN | IFORMATION |
| Parent/ Guardian | ¥1 |
| Relationship | : |
| Phone Number | : Email : |
| Address | : |
| Occupation | : Work Hours : |
| Work Address | |
| Parent/ Guardian | ¥2 |
| Relationship | : |
| Phone Number | : Email : |
| Address | : |
| Occupation | : Work Hours : |
| Work Address | |
| SCHEDUL | E REQUESTED |
| Number of days | 2 days 3 days • Part-time spaces are limited and subject to availability |
| Days of the Week | • 2-day places are only available for Toddlers • Early Drop off is available for an additional fee |
| 2nd choice | Early Drop off : Early |
| | M T W Th F Holl 7.50-5.00 M T W Th F |

SCHOOL YEAR 2023-24

After the center has informed you that we have space for your child, a security deposit of \$200 and a non-refundable fee equal to one month's tuition is required to reserve the space. The security deposit will be refunded after your child has withdrawn from the Center provided that the Center has been given 60 day's written notice if withdrawal is before August 31st. The non-refundable fee is applied to your first month's tuition.

Withdrawal requires sixty day's written notice, (a full two months). If you withdraw with less then the required written notice, your child is still considered "enrolled" for the entire period, and you are responsible for tuition for the two months that begin with the next tuition period. All withdrawals are scheduled for the last day of the month. If you withdraw before the end of the month, tuition is due for the entire month.

Initial Here

A late fee of \$15 will be charged for all bills outstanding after the first of the month and an additional \$20 will be charged after the 15th. If tuition remains unpaid after the 15th of the month (without prior arrangements), your child may be required to withdraw.

Initial Here

By signing this document, I acknowledge that I have read and understand the above policies and agree to abide by them. I also understand that if I have any questions, I have the right to ask for clarification.

Checks should be made payable to:

The Children's Center of Lexington 1580 Massachusetts Avenue Lexington, MA 02420

The Children's Center of Lexington admits students of any race, religion, color, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, religion, color, sexual orientation, cultural heritage, national origin, gender or disability.

Please call the office at (781) 861-9370 if you need additional information.

| Signature : | Date : |
|--------------------------|--------------------|
| OFFICE USE ONLY | |
| Date Received : | App fee Received : |
| Potential Classroom(s) : | Contract Sent : |
| Contract due back by : | Deposit received : |