



STUDENT ADMISSION FORM

Child Information

Last _____ First Name _____

Address _____

Date of Birth _____ Gender _____

Parent/Guardian

Mother's Name _____

Address (if different) _____

Home # _____, Cell # _____, Work # _____

E-mail _____

Parent/Guardian

Father's Name _____

Address (if different) _____

Home # _____, Cell # _____, Work # _____

E-mail _____

Deposit: ECDC only accepts tuition payment through ACH Debit

_____ Please debit my account for the deposit and registration fee. (Signed agreement attached)

_____ Attached, please find a check for my deposit and registration fee. Tuition and fees must be paid by ACH.

ECDC Use Only:

Enrollment Date: _____ Tuition: _____ Subs: _____

Infants _____ Toddlers _____ Preschool _____ Before & After School Care _____ Aftercare only _____

Summer Camp _____

Room Number, if Known _____