

# LHBC Kid Connections Registration Packet

**Child's Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_ **Parent email:** \_\_\_\_\_

**Parent phone:** \_\_\_\_\_ **Child's Allergies:** \_\_\_\_\_

## Summer Session (June 7th-July 28th)

## School Session (September 6th-May 21st)

**Please check your desired enrollment option:**

- \_\_\_\_\_ 1 day per week - Wednesdays
- \_\_\_\_\_ 2 days per week - Mondays and Fridays
- \_\_\_\_\_ 3 days per week - Mondays, Wednesdays, and Fridays

**Please check one based on your child's date of birth and class going into in the coming Fall;**

- \_\_\_\_\_ Nursery, Toddler A, Toddler B, PreK 2/3 (We will assign these classes based on the ages of the children)
- \_\_\_\_\_ PreK 3yr Class
- \_\_\_\_\_ PreK 4 yr Class
- \_\_\_\_\_ Kindergarten
- \_\_\_\_\_ Elementary (1st -4th grade)

Depending on enrollment we may or may not be able accommodate other enrollment options. Please list your request here and we will contact you following registration.

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Nursery, Toddler A, Toddler B, PreK 2/3  
(We will assign these classes based on the ages of the children)

**Please check your desired enrollment option:**

- \_\_\_\_\_ 1 day per week - Wednesdays
- \_\_\_\_\_ 2 days per week - Mondays and Fridays
- \_\_\_\_\_ 3 days per week - Mondays, Wednesdays, and Fridays

PreK 3, and Pre K 4 are 3 days a week classes, Mondays, Wednesdays and Fridays

**Please check one based on your child's date of birth;**

- \_\_\_\_\_ PreK 3 Class (3 years old as of September 1st)
- \_\_\_\_\_ PreK 4 Class (4 years old as of September 1st and entering Kindergarten the next school year)

Depending on enrollment we may or may not be able accommodate other enrollment options. Please list your request here and we will contact you following registration.

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LHBC Kid Connections Enrollment Application  
642 Brookhurst Dr Dallas, TX 75218

Enrollment Date: \_\_\_\_\_ Withdrawal Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_

Home Address \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Telephone #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Drivers License: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Drivers License: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Parents Relationship to each other:  Married  Divorced  Separated  Single

*(If divorced, a copy of the Divorce Decree noting guardianship, days of visitation, etc. must accompany this form.)*

Child lives with (please check all that apply):  Mother  Father  Other \_\_\_\_\_

Family Religious Preference: \_\_\_\_\_ Church Membership: \_\_\_\_\_

List at least one local person who will be available to assume responsibility for your child in an emergency if parents cannot be reached.

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Address \_\_\_\_\_ Drivers License \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

I authorize my child, \_\_\_\_\_, be released by LHBC Kid Connections to the following persons, in addition to those already listed on this form.

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work/Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ DL# \_\_\_\_\_

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

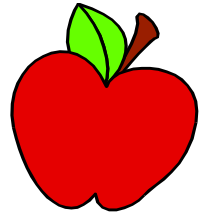
Work/Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ DL# \_\_\_\_\_

**Authorization for Emergency Medical Attention**

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the person in charge to take my child to Doctor's Hospital or the nearest available hospital for emergency treatment. I give consent for this facility to secure any and all necessary emergency medical care for my child.

\_\_\_\_\_  
Signature/Parent or legal guardian

## Fees



### Registration Fee School Year Program which includes \$50.00 for a supply fee (One time fee per school year)

1 day/week class=\$100.00

2 day/week class=\$150.00

3 days/week class=\$200.00

### Summer Registration Fee (one time fee for summer session)

\$75.00

\*Registration fees are due upon registering but we will accept payment up to May 1st for summer or August 1st for fall to keep your spot.

Tuition is due the first school day each month. The rates are as follows:

### Nursery, Toddler A, Toddler B, PreK 2/3

1 day/week-\$115.00/month

2 days/week-\$205.00/month

3 days/week-\$290.00/month

### PreK3, & PreK4 Classes

\$290.00/month

**\*We give a 10% discount for multiple siblings enrolled.**

### Summer Session

Summer Session begins June 7th and ends on July 28th. (We do not have school on July 5th or July 14th)

### 2017-2018

School begins on Wednesday, September 6th, 9:00 am, bring your lunch!

The last school day is May 21st.

Parent Orientation will be the evening of September 5th.