



Registration Form

Thank you for your interest in Innovation Station LLC. Choosing a quality child care program is one of the most important decisions you will make. We take your decision seriously and are committed to living up to the important responsibility of caring for your child.

To register, please return this completed form to Innovation Station LLC with a registration fee of \$100.00. The registration fee is non-refundable.

When your registration form and fee are received, your start date will be determined. The Director will provide the parent/guardian policies/procedures and enrollment forms at that time.

Child's Name: _____ Date of Birth: ____/____/____

Child's Name: _____ Date of Birth: ____/____/____

Parent/Guardian Information:

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Address: _____

Address: _____

E-mail Address: _____

E-mail Address: _____

Home Phone: _____

Home Phone: _____

Company Name: _____

Company Name: _____

Company Phone: _____

Company Phone: _____

Days and Hours Desired:

MON _____ TUE _____ WED _____ THU _____ FRI _____

What date would you like enrollment to begin? _____

How did you hear about Innovation Station LLC? _____

(Parent/Guardian's Signature)

(Date)

Thank you for choosing Innovation Station LLC.

For Administrative Use:

Date Registration Received: _____ Date to Wait List: _____

Check Number: _____