



BEFORE and AFTER SCHOOL CARE APPLICATION 2012-2013

A non-refundable \$30 registration fee must accompany this form.

CHILD'S NAME _____

BIRTHDATE _____ AGE _____ MALE _____ FEMALE _____

PARENT 1 NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ OTHER _____

EMAIL ADDRESS _____

EMPLOYER _____ OCCUPATION _____

PARENT 2 NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ OTHER _____

EMAIL ADDRESS _____

EMPLOYER _____ OCCUPATION _____

**Grade enrolled for
2011/12 school year:**

- _____ Clinton Elementary School
- _____ Indian Springs Elementary
- _____ Indianola Elementary
- _____ Immaculate Conception (After School *only*)

Grade _____

Registering for:

- _____ Before School
- _____ After School

Parent's Signature _____

Date _____

North Broadway Children's Center is a non-profit program that enrolls all children regardless of race, faith, creed, disability, or national origin. NBCC is a Title XX and Champion of Children Fund provider.

FOR OFFICE USE ONLY

Date application received _____

Received by _____

I/C _____

Date of Entry _____

Tuition _____

Registration fee _____

