

Kingdom Kids Learning Center
Pre-enrollment form

Name of child _____

Date of birth _____

Name of second child _____

Date of birth _____

Name of third child _____

Date of birth _____

Address _____

City

State

Zip

Mother or Guardian _____

Phone _____

Father or Guardian _____

Phone _____

Email Address: _____

When would you like to start care: _____

On receiving this form I will hold a spot for your child at Kingdom Kids Learning Center.

I will notify you when we are ready to offer tours of our facility and begin enrollment.

Child Care License is pending completion of building renovations to assure a safe learning environment for your child. Anticipated opening is the week of Sept. 11.