



Time For Tots
The Children's Center
First Congregational Church
2019-20 Registration Form

Child's name _____ Nickname _____ Sex _____ DOB _____

Address _____ City _____ ZIP _____

Email Address _____

Parent/Guardian Names:

Name: _____ Cell # _____

Place of Employment _____ Work # _____

Name: _____ Cell # _____

Place of Employment _____ Work # _____

Names & ages of other children: _____

Are you a member of The First Congregational Church of Hudson? _____

Do you have a church/worship affiliation? _____ If yes, where? _____

Is your child in diapers? Yes/ No Toilet training? Yes/ No Toilet Trained? Yes/ No/Almost!

INDICATE THE DAY YOU PREFER YOUR CHILD TO ATTEND (Monday- Thursday)

First Choice: _____ **Second Choice:** _____ **Third Choice:** _____

We offer a second day option on Friday. (limited availability) Do you want a second day on Friday? **Yes/No**

List any allergies or health concerns:

*Please request additional documentation for any medications (over-the-counter or prescription) or dietary adjustments for your child.

Please complete reverse side



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Circle expected year of Kindergarten entrance: 2022 2023 2024

List any developmental concerns:

What are the top three items you are looking for in a preschool for your child?

- 1.) _____
- 2.) _____
- 3.) _____

Briefly describe your child:

Please return this form, along with a **non-refundable** \$50 registration fee per child to First Congregational Church Children's Center, Childcare Program, 47 Aurora St., Hudson, Ohio 44236. If your child is being placed on a waiting list, a registration fee should not be paid at this time. If you have any questions, please contact Dee Buchanan at (330) 342-3977.

Signature _____ Date _____

OFFICE USE ONLY:

Tour Date: _____

Date of Admission: _____

Check # _____

Amount: _____

Dates Confirmed: _____

Office Center: _____

Packet/Contract: _

Please complete reverse side