



**Integrity
Childcare**

Committed, Honest & Reliable Care

New Child Enrollment

Child's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Date of Birth: _____
Drop Off Time: _____
Pickup Time: _____
10 Hrs. included per day in Regular Tuition Cost

Behavior Concerns: ___ Yes ___ No
Previous Center: ___ Yes ___ No
Home Daycare: ___ Yes ___ No
Toilet Trained: ___ Yes ___ No
Allergies: ___ Yes ___ No
Still Napping: ___ Yes ___ No

Father's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Date of Birth: _____
Email: _____
Cell: _____
Carrier: _____

Door Code: _____ 4 Digit Number

Please Check One Option For Text Notifications

Opt - IN ___ Opt - Out ___

Mother's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Date of Birth: _____
Email: _____
Cell: _____
Carrier: _____

Door Code: _____ 4 Digit Number

Please Check One Option For Text Notifications

Opt - IN ___ Opt - Out ___

About Me:

Parents/Gaurdians thank you for choosing Integrity Childcare for care of your child. We are excited to work with your family to provide the best Early Education possible. Please remember to fully read Integrity Childcares full handbook as it contains important information that is required to be signed before starting.

Parent Intial _____