



CONTRACT/ENROLLMENT 2017/18

Y-Creative Booth Finley/DCY Y-Creative Asbury

Child's Name _____ **Birth Date:** _____ **Sex:** _____
(Last) (First) (Middle)

Address: _____ **Zip Code:** _____ **Start Date:** _____

Child Lives with: _____

Primary Payer: _____ **Relationship to Student:** _____

Soc. Sec. #: _____ Address: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer: _____ E-mail: _____

Secondary Payer: _____ **Relationship to Student:** _____

Soc. Sec. #: _____ Address: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employer: _____ E-mail: _____

Marital Status: Married Divorced Separated Single Widowed

If there is a separation or divorce custody issue of which we should be aware, please explain: _____

Agency Assistance: None DHS Promise Jobs CCR&R Y Scholarship Other: _____

Enrollment Status: Y Member Non-Member Lord of Life member Finley Employee

Full time (30+hrs/wk) Part-time (15-30 hrs/wk) Drop-In (Infant/Toddler/Pre-School)

INFANT CHILDCARE (6 weeks-24 months) TODDLER CHILDCARE (24 months - 36 months) PRESCHOOL CHILDCARE (3yrs - 5 yrs) V4 PRESCHOOL

PAYMENT Method: Please complete either Payment Option 1 or Payment Option 2 Form
(Please indicate if billing ledger needs to be split between payers, include percentages of each share)
A \$50 non-refundable family registration fee is required to hold each child's place in the program

ACH BANK WITHDRAWAL Authorization (Bi-Weekly Payment Schedule)

Recurring CREDIT CARD (Bi-Weekly Payment Schedule)

I have read and understand the Dubuque Community Y's childcare policies as outlined in the Parent Handbook. I realize this contract may be terminated at any time if I fail to abide by any of these policies. In addition, I understand it is my responsibility to give written notice when my child will no longer need Child Care.

Parent Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____