



2711 Amherst Avenue
Manhattan, KS 66502

Phone: 785.776.2162
E-mail: livingwordchurchelc@gmail.com
Website: livingwordearlylearningcenter.com

TODDLER

Application for Enrollment

Instructions:

- Once complete, drop-off, mail, or scan and email application to the center.
- Payments accepted via cash or check made payable to Living Word Early Learning Center.
- Note: Enrollment is open year round depending on current openings. We accept children ages 12 months/ walking to 2.5 years in our toddler program. *Please see Preschool Application for children ages 2.5yrs-6yrs.*

Child Information

Last Name	First Name	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address	Birthday	Age of Child

Parent/Guardian Information

1. Last Name	First Name	Email
Address	Cell Phone	Work Phone

2. Last Name	First Name	Email
Address	Cell Phone	Work Phone

Local Emergency Contact Information

1. Last Name	First Name	Address Phone Number
2. Last Name	First Name	Address Phone Number



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Our toddler room has full time only spots. Our Preschool Program has part week and full time options available.

Full Time

Status	Days	Hours	Monthly Rate	Bi-Monthly Rate	✓
Full Time	Monday-Friday	7:00am-5:30pm	\$875	\$437.50	<input type="checkbox"/>

Estimated Start Date	
Approximate Drop-Off Time	
Approximate Pick-Up Time	

*We accept DCF, Child Care Aware, and Raising Riley Scholarships.

*Ask about our multi-child discounts!



LIVING WORD EARLY LEARNING CENTER
 OUR PASSION. THEIR FUTURE

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Requirements Upon Enrollment:

1. **\$30.00 non-refundable application fee per family**
2. **Deposit of first 2 weeks of care paid prior to start date. This amount will be credited towards your first month's tuition. Once the application fee and deposit are processed, your child's spot will be held until their approved start date.**

Note: Deposits are not required in order to be put on our waiting list. A deposit will be requested once a spot becomes available.

Cash or Checks made payable to Living Word Early Learning Center

3. **Completed Registration Packet will need to be turned in at least three days prior to your child's approved start date.**

I/We choose to pay: Monthly Bi-Monthly

Financial Agreement between LWELC and Parents of LWELC Children:

I, the parent/legal guardian of _____ (child's name) agree to the following terms of enrollment.

I agree to read the LWELC Parent Handbook (a hard copy will be provided upon request) and follow the center's policies.

I agree to pay the enrollment fee at the time of submitting the enrollment form.

I agree to pay 2 weeks tuition to secure my child's spot at LWELC. This money will be applied towards your child's first month tuition.

I agree to give at least 2 weeks advance notice prior to the termination of my child's enrollment in LWELC. If no notice is given and no arrangements have been made with LWELC, you will be billed the final 2 weeks tuition.

I give permission to LWELC staff to call my listed Emergency Contacts if they are not able to reach me.

 Parent's Name

 Parent's Signature/Date

 Provider's Name

 Provider's Signature/Date