



**Kid's Quest
Registration Form**
\$50.00 Registration Fee required to reserve spot
117 Marlin Road, White House, TN 37188

Full name of Child _____ M/F (circle)
(Last) (First) (Middle)

What does child like to be called? _____ Child's Birthday _____

Name of Mother _____ Home Phone _____ Cell _____

Address _____
(Street) (City) (State) (Zip)

Where Employed _____

Work Phone _____ Work Hours _____

Married to Father: ___ Yes ___ No

Name of Father _____ Home Phone _____ Cell _____

If different from mother:

Address _____
(Street) (City) (State) (Zip)

Where Employed _____

Work Phone _____ Work Hours _____

Email to send Camp info: _____

Where does your family attend church? _____
Member? ___ Yes ___ No

Name of persons authorized to act for parents in case of emergency:

Family Member Name: _____ Phone: _____
Address: _____

Friend's Name: _____ Phone: _____
Address: _____

Other children in the family:

Name					
Age					

Does your child have any unusual health conditions, such as allergies, asthma, epilepsy, etc.? If none, please write none. _____

Has your child had surgery? Please list type with date. _____

To meet your child's individual needs, please give us any helpful information:

Children who have completed Kindergarten – 5th Grade may enroll in Kid’s Quest. Final enrollment will be based on space availability. **Note: \$50 non-refundable registration fee is due upon enrollment.**

My child has completed the _____ grade.

Full-time enrollment _____ .

Daily _____

Specific weeks: _____ (please list _____)

June Only: _____

July Only: _____

*****No changes will be made to enrollment status.*****

I understand this facility is not required to be licensed by the state as a child care agency.

Parent Signature

Date