



**1180 Springmaid Ave.  
Fort Mill, SC 29708  
Phone: 803-396-0900**

Visit us at [www.fieldofdreamscenter.com](http://www.fieldofdreamscenter.com).

## Application for Child Registration

To be completed by parent or guardian

Please forward a completed form for each child to the address above.

<b>Child Information:</b>	Date of Application: _____
Child's Name: _____	Date of Birth _____
<div style="display: flex; justify-content: space-between; width: 100%;"> <span>Last</span> <span>First</span> <span>M.I.</span> <span>Nickname</span> </div>	
Address: _____	
Street	City State Zip

<b>Class in which child will be enrolled:</b>		
<u>Infant nursery 6 weeks to 12 months</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
	M-F	
<u>One to two years</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
	M-F	
<u>Two to three years</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
	M-F	
<u>Three to four years</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
	M-F	
<u>Four to five years</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
	M-F	
<u>After-school (ages 5 to 12)</u>	<input type="checkbox"/>	Hours: 2:00 pm – 6:00 pm
(You may check summer camp also)	M-F	
(Fives must have attended kindergarten)		
<u>Summer Camp (ages 5 to 12)</u>	<input type="checkbox"/>	Hours: 7:00 am – 6:00 pm
(You may check After-school also)	M-F	
(Fives must have attended kindergarten)		
Approximate drop off time: _____	Approximate pick-up time: _____	

**After-school children only:**

Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Does your child need to be picked up from school?  
(pick-up provided for Fort Mill schools)

Yes

No

**Family Information:**

Mother's / Guardian's Name	Mother's address	City	State	Zip
Mother's Home Phone	Mother's Work Phone	Mother's Employer		
Mother's Mobile Phone	Mother's email			

Father's Name	Father's address	City	State	Zip
Father's Home Phone	Father's Work Phone	Father's Employer		
Father's Mobile Phone	Father's email			

Will there be a brother or sister attending as well?

Yes

No

If so, please list their names and ages below. Please also complete another form specifying the program desired for each.

Name	Age	Name	Age
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Does your child have any special needs? \_\_\_\_\_

Where is he/she currently enrolled? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_



# Tuition Schedule and General Information

New Rates Effective August, 2008

Program	Reg. Fee	Weekly Tuition	Child:Staff Ratios
Infants - 6 weeks to 12 months	\$90	\$223/wk	4:1
One to Two years old	\$90	\$202/wk	6:1
Two to Three Years old	\$90	\$202/wk	8:1
Three to Four Years old	\$90	\$189/wk	10:1
Four to Five Years old	\$90	\$189/wk	13:1
After School - 5 to 12 years	\$90	\$80/wk	15:1
Summer Camp - 5 to 12 Years	\$90*	\$175/wk	15:1

## General Information:

- A non-refundable \$90 registration fee plus one week of tuition per child is required to register.
- The tuition deposit will be credited to the last week of tuition upon withdrawal or graduation.
- Some additional information and forms will be required before your child can attend the program. Examples include paperwork for your child's physical, immunization records, and authorizing who may pick up your child.
- Hours are from 7:00 a.m. to 6:00 p.m.
- Tuition is required to be paid in advance through either monthly or semi-monthly electronic draft. There is a \$30 fee for non-sufficient funds.
- Once enrolled, an annual \$90 registration fee (non-refundable) is required - \$180 max per family per year.
- The registration fee for the summer camp is not required if already enrolled in the after-school program. There will be an additional activities fee required – amount to be determined,
- There is an additional school-age daily fee for teacher work days at the public schools: Additional daily fee of \$20 for full day attendance. \$15 additional on early release days.
- Sibling discount: 10% discount on the oldest child
- Holiday and work day closings: New Years Day, Good Friday, Memorial Day, July 4, Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas week, and two teacher work days to be published on the annual calendar.
- Since Field of Dreams is closed during Christmas week, tuition payments are calculated based on 51 weeks.
- Late pickup fees: 6:01 to 6:15 .... \$15, 6:16 – 6:30 .... \$30 etc. per child
- A minimum of two weeks notice is required for withdrawal. No tuition refunds are allowed.
- Fees and policies are subject to change at the discretion of the Center management team.
- Required waiting list fee is \$10. Priority is given to staff and families with siblings already enrolled.

Note: This information is subject to change without notice.

By signing this form, I understand and agree to abide by the policies set forth upon this document.

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date