

Trinity Family Learning Center

16928 Evans Road

Bonner Springs, KS 66012

Phone: 913-724-4441

E-mail: tflcdirector@gatheringinchrist.org

Application for Enrollment

Child Information

Child's Full Name _____ Nickname _____ Age _____

Date of Birth ____/____/____ Sex ____ Telephone Number _____

Address _____ City _____ Zip Code _____

Anticipated Schedule Need _____

Mother/Guardian Information

Name _____ Home Phone _____

Home Address _____

Place of Employment _____

Business Address _____

Business Phone _____ Cell Phone _____ Pager _____

Father/Guardian Information

Name _____ Home Phone _____

Home Address _____

Place of Employment _____

Business Address _____

Business Phone _____ Cell Phone _____ Pager _____

Please return this form with a registration check for \$30 (\$50 if enrolling more than one child) to TFCLC.

Office Use Only

Registration \$30/\$50 _____

Application Date _____

Estimated Start Date _____

Enrollment Needs

Toddler Care _____ FT _____ PT

Preschool Care _____ FT _____ PT

School Age _____ AM _____ PM