Fun & Study Learning Center Admission Application Form

Child's Full Name	Nickname				
Date of Birth	Present Age (Years & Months)		_ □Male □Female		
Home Address					
Are you aware of any all	ergies? \square Yes (please explain)	□ No		
Parent's Name					
Home Address		Primary Phone			
Employer		Occupation/Position	1		
Alt. Phone	Work Phone	Email			
Parent's Name					
Home Address		Primary Phone			
Employer		Occupation/Position	1		
Alt. Phone	Work Phone	Email			
Siblings Names & Ages _					
Has your child ever attended day care? ☐ Yes ☐ No If yes, where?					
Why are you considering Fun & Study for your child?					
How did you hear about	us?				

The After School program the base fees \$600 a month includes

- ✓ Math and English Enrichment (Quest exam)
- ✓ Young Rembrandt drawing
- ✓ Karate classes
- ✓ Mandarin

Elementary enrichment	Additional activities	
☐ After school session (3:30pm – 6:00pm)	(Weekly once based on 4 weeks a month.	
☐ Summer Camp - \$1,200 a month	(For months with 5 weeks additional pro-rated	
,	charge will apply.)	
☐ Spring Camp - \$ 350 a week	☐ Swimming \$ 100 a month	
☐ Winter Camp - \$ 600 for 2 weeks	☐ Abacus / Vedic Math \$80 a month	
☐ Holiday Camp - \$75 a day	☐ Chess \$60 a month	

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Emergency Contact:			
Name	Phone	Relationship	
Doctor / Hospital		Primary Phone	
Special Information: Medical, allergi	es (foods, etc.), limitations, su	urgery, heart, etc.	
child to be treated by a hospital, phy accident, or illness. I/We further agre including transportation to and from agree to hold harmless Fun & Study (rsician, or other certified med ee to assume all risks and haz the center and do hereby wa owners, supervisors, instructo self or my/our child for any cla sed by or resulting from the so of photographs and/or videota	ards incidental to such participation, niver, release, absolve, indemnify, and ors, teachers, volunteers and aim arising out of any injury to myself ole negligence or concurrent	
Authorized to Pick up Student:			
Name	Phone	Relationship	
Name	Phone	Relationship	
Name	Phone	Relationship	
	owing your notice to the Cennt to leave between March 1		
Signature(s)		Date	
Signaturo(s)		Data	

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Direct debit form:
E-Check Automated Payment authorization form.
I authorize Fun and Study Learning Center to initiate either an electronic debit or to create and process a demand draft against my bank account according to the terms outlined below. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law.
Terms of Billing
Bank Information Routing Number: Account Number: Account Type: Checking Savings, Consumer Business
Customer Signature:
Customer Printed Name:
Date: