



Enrollment Application

****The \$50.00 (per child and non-refundable) registration fee due upon enrollment*

Date: _____

Parent/Guardian: _____

Phone: _____ E-Mail: _____

Start Date: _____

Children who will be attending Little Clippers:

1. _____ DOB _____

2. _____ DOB _____

3. _____ DOB _____

Interested in: Part-Time Full-Time

Circle days your child will attend: M T W Th F

**Part-time days must remain the same for each week and decided at the time of enrollment.*

How did you hear about us?

4 C's Internet Referred By: _____