

2026-2027

Creative Learning Center
Preschool Registration

Registration fee is non-refundable _____ (initials)
(\$100 for 2 DAY children; \$125 for all 4 DAY PREK children)

FOR OFFICE USE ONLY New/Ret

Check #/Cash: _____

Date of Enrollment: _____

Day/Class: _____

Please circle preference of days: Monday/Wednesday Tuesday/Thursday Monday – Thursday (PREK ONLY)

Child's Full Name: _____
(Last) (First) (Middle)

Address _____ City/State/Zip _____

Name child is called: _____ Child's Sex: Male _____ Female _____

Child's Birth Date: ____/____/____ Is your child potty trained? _____

All children in our 3 year old and preK programs MUST be potty trained

Primary language spoken in the home: _____

Has your child been enrolled in another preschool/Parent's Day Out? If yes, where? _____

If so, has your child been asked to leave the program? _____

Parent/Guardian Information:

Mother or Guardian _____ Mother's Cell Phone (____) _____

Mother's Home Address _____ City/State/Zip _____

Mother's Place of Employment _____ Mother's Work Address _____

Mother's Work Hours _____ Mother's Work Phone _____

Father or Guardian _____ Father's Cell Phone _____

Father's Home Address _____ City/State/Zip _____

Father's Place of Employment _____ Father's Work Phone _____

Father's Work Hours _____ Father's Work Address _____

Primary Email Address for communication _____

If parents are divorced, or separated, who is Custodial Parent? _____

May the non-custodial parent pick up the child? _____ Yes _____ No

The Creative Learning Center must be provided with court issued custody paper that clearly describes the custody arrangements. Any person granted custody in such papers may pick up the child during the times that person has custody and may designate other persons who are authorized to pick up the child at such times, unless court papers state otherwise.

Names & Ages of Siblings _____

Where does your family regularly attend church? _____

How did you hear about our program? _____

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Emergency Information

Child's Name _____

Child's Date of Birth _____

Name Child Goes By _____

Child's Gender _____

Mother's Name _____

Mother's Phone _____

Father's Name _____

Father's Phone _____

Persons whom you authorize The Creative Learning Center to contact when a parent or guardian cannot be reached, in the event of an emergency.

Name _____

Relationship _____

Address _____

Phone _____ Cell _____

Other than those listed above, who may pick up your child?

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

I understand the person to pick up my child in an emergency will be required to show a driver's license. I will notify my child's teacher and the CLC office by phone, or in writing if possible, each time an alternate pick up person is coming.

Child's Medical Information

Child's Physician _____

Address _____ Phone _____

Child's Dentist _____

Address _____ Phone _____

HEALTH: Any health or special situations concerning your child of which The Creative Learning Center should be aware, such as allergies, existing/pre-existing illnesses, injuries, disabilities, or hospitalization during the past twelve months, or any medications prescribed for long term use. _____

Please specify any dietary restrictions (if an infant, specify formula): _____

Any food allergies, other allergies or special needs _____

Hospital preference _____

Is there anything you would like us to know about your child? _____

(first time attending school, etc.) _____

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General Information:

Does your child need help: Dressing _____ Eating _____ Washing Hands _____

Has your child been in any type of therapy? (speech, occupational, physical, etc) _____

Does your child have any special fears or problems? _____

Who lives in the home with the child? _____

Is this your child's first time attending school? _____

Has your child been cared for by anyone other than the parents? _____yes _____no

If yes, whom? _____

Favorite Book: _____ Favorite Toy/Game: _____

If your child is sad or upset, what soothes your child the best? _____

THIS FORM MUST BE COMPLETED AND RETURNED TO THE CREATIVE LEARNING CENTER PRIOR TO CHILD'S ATTENDANCE.
IF ANY INFORMATION CHANGES, IT IS THE PARENT/GUARDIAN RESPONSIBILITY TO NOTIFY THE CLC OFFICE.

- CLC enrollment is open to children ages 6 months to 4 years who are able to participate in a curriculum developmentally correspondent to the child's physical age.
- All applications are subject to evaluation of the specific needs of each child and the ability of CLC to accommodate those needs through its program, current staff, and facilities.
- CLC reserves the right to withdraw any child from our program, who requires a degree of attention or supervision such that the entire class is unfavorably affected. This decision will be made through a careful process of evaluation and consultation by the preschool teachers and Director.

Signature of Mother/Guardian _____

Date _____

Signature of Father/Guardian _____

Date _____

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Creative Learning Center
Enrollment/Fees Agreement

It is my understanding that my child, _____, is enrolled in the LifePoint Church Creative Learning Center program. Monthly tuition of \$250.00 for the 2 day program or \$395.00 for the 4 day preK program is due and payable on the first day of each month. If monthly tuition is not paid by the tenth of the month, a \$10.00 late fee will be assessed. If monthly tuition is not paid by the end of the month, participation in the CLC program may not continue. The non-refundable registration fee is due when the registration forms are submitted for enrollment.

Should my child be withdrawn for any reason prior to the end of the preschool year, I agree to submit to the director, a notice of withdrawal two weeks prior to the last day of attendance or agree to pay one additional month of full tuition.

Tuition is based on a yearly cost, not the number of days per month, and is divided into 10 equal monthly payments. No refunds will be given for withdrawal from the preschool prior to the end of the month or for days missed due to family vacations, illness, weather-related closings or preschool breaks.

I understand that failure to pay tuition according to the schedule above may result in the removal of my child from the CLC program.

Signature of Parent/Guardian _____ Date _____

Creative Learning Center

Parent's Day Out Program

The four day PreK Program of CLC IS licensed by the Tennessee Department of Human Services, therefore children enrolling in this program have additional requirements to participate (i.e. up to date shot record on file, additional forms, etc.)

The Tennessee Department of Human Services does not require that Parents Day Out Programs be licensed. Due to this exemption, the two day PDO program of LifePoint Church (Creative Learning Center) is not a licensed childcare facility.

Signature of Parent/Guardian _____ Date _____

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Photographic Release for Minors

CLC does not post pictures of children on our social media accounts. Pictures are taken of classes and children for use in classroom scrapbooks, etc. However, we do ask for a general release for this, which is below.

Please circle one of the below:

I DO

I DO NOT

give LifePoint Church and the Creative Learning Center permission to publish in print, electronic, website or video format the likeness or image of my child.

I release all claims against LifePoint Church with respect to copyright, ownership and publication, including any claim for compensation related to use of the materials.

Minor's Name (Please Print)

Date (this release is in effect for 1 year)

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

General Guidelines:

It is recommended that a release be obtained when photographing or videotaping a minor (under 18). Parent or guardian signatures are required; signatures of minors are not sufficient. When images are published, the Church will take cautionary steps to provide minimum identifying information and will not use a specific street or mailing address, email address or phone number(s).