

Lakeshore East (312-565-7300)

Date of Application: _____

Child's Name: _____ Preferred Name/Nickname: _____

Date of Birth: _____ Age: _____ Gender: F M

Parent/Guardian Name: _____ E-mail: _____

Home #: _____ Cell #: _____ Work #: _____

Address: _____

Parent/Guardian Name: _____ E-mail: _____

Home #: _____ Cell #: _____ Work #: _____

Address: _____

Bright Horizons at Lakeshore East accepts applications year round. Admission is based on application date and flexibility or requested days. Please indicate your preference from the options below.

FULL DAY 7:30am-5:30pm

Two days ☐

Three days ☐

Four days ☐

Five days ☐

Circle choice of days:

M T W TH F

Requested start date based on availability: _____

Comments on flexibility of days: _____

Signature of Parent/Guardian: _____ Date: _____

Please submit a check to Bright Horizons for the registration fee of \$150 when submitting this application form. You can submit by mail or in person.

*By signing this enrollment application, the Parent/Guardian above understands and accepts the following policies: The registration fee is non-refundable and non-transferable. The first month's tuition is due within two weeks of the time a spot is offered and is also non-refundable and non-transferable.

For office use only:

Date enrollment application received: _____ Received by: _____

Check #: _____ Name on check: _____ Cash: _____