



KIDSCO. INC.

"It's Their Business"

Thank you for your interest in KidsCo! Attached you will find the 2011-2012 registration forms for our Before and After School Programs. We have outlined the registration process below to make it as easy as possible to enroll your child/children in our programs!

Open enrollment for new families to the KidsCo Before and After School Programs will begin on Monday, May 2nd at 8:30am in person at our Main Office, by fax or by regular mail. Enrollment is awarded on a first come, first served basis therefore we cannot accept any registrations until 8:30am on May 2nd. Please note that we will not accept registration forms on site at our school locations.

Once we receive your registration form along with the one-time per family registration fee of \$25.00, we will begin the process of enrolling your child/children. After receiving your registration form and fee we will mail you a confirmation letter of enrollment. In addition to your confirmation you will receive all of the mandatory county and state forms we will need completed prior to the first day of school on August 29th. Due to such a high demand at some of our locations, a waitlist may need to be started. If you are put on a waitlist a letter stating your position on the waitlist will be mailed to you.

Additionally, we have placed all of the mandatory county and state forms on our website for those eager to get started on completing them now.

During the first week of August you will receive your first invoice for the school year along with the 2011-2012 Parent Handbook.

If you have any questions about this process or any of the paperwork please feel free to contact our Main Office at 301.740.9600. We look forward to welcoming each and every one of you into our KidsCo family!

Sincerely,

The KidsCo Team
301.740.9600
www.KidsCoOnline.com



Registration Form

2011-2012 School Year
Before and After School Care

School Site _____

For Office Use Only:

Received _____	Payment Method & Amount _____
Confirmed _____	Entered _____



To register your child/children for KidsCo, please do the following:

1. Fill out this registration form completely.
2. Attach a one-time-only registration fee of \$25 per family. If registration is made after August 1, 2011, also include the first month's tuition.
3. Mail this registration form with your payment to KidsCo, Inc., 7620-J Rickenbacker Drive, Gaithersburg, MD 20879, or fax it with a credit card payment to 301-740-9611.

We will send you a confirmation of enrollment when we receive your registration form and payment. At that time you will also receive a Parent Handbook and a packet of information and forms that must be completed prior to starting at KidsCo. If you have any questions, please call our Main Office at 301-740-9600.

1st Child's Name _____

Date of Birth _____ / _____ / _____ Grade in Fall of 2011 _____ Boy Girl

2nd Child's Name _____

Date of Birth _____ / _____ / _____ Grade in Fall of 2011 _____ Boy Girl

Home Address:

Street _____

City _____ State _____ Zip _____

Home Phone # _____

Person(s) authorized to pick up child: Mother Father Guardian Other _____

Mother/Guardian Name _____

Address (if different from child) _____

Home Phone # _____ Cell Phone # _____

Daytime Phone # _____ Social Security Number _____ / _____ / _____

E-mail _____

Father/Guardian Name _____

Address (if different from child) _____

Home Phone # _____ Cell Phone # _____

Daytime Phone # _____ Social Security Number _____ / _____ / _____

E-mail _____

***note that a valid email address is needed to receive quarterly newsletters, reminders, invoices, weather alerts and closings electronically**

Person responsible for payment of fees _____

Address (needed if different from parents/guardians listed above)

Street _____

City _____ State _____ Zip _____

Daytime Phone # _____ Social Security Number _____ / _____ / _____

Does your child/children have any allergies? (food, bees, etc.) _____

Does your child/children have any medical/physical limitations? If so, explain.

Will your child/children be taking medication(s) while at KidsCo? If so, please list medication(s) and reasons for taking it. If so, you will also need to provide a completed Medication Order Form which can be downloaded from our website KidsCoOnline.com.

ELEMENTARY SCHOOL

I would like to enroll my child/children in the following plan:

1st Child	2nd Child	Before School Care Only 6:30am until school starting time	Circle Day(s) Needed
<input type="radio"/>	<input type="radio"/>	1 day per week at \$63.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	2 days per week at \$116.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	3 days per week at \$172.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	4 days per week at \$219.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	5 days per week at \$266.00 per month	
After School Care Only 3:00pm until 6:30pm			
<input type="radio"/>	<input type="radio"/>	1 day per week at \$93.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	2 days per week at \$180.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	3 days per week at \$266.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	4 days per week at \$344.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	5 days per week at \$418.00 per month	
Before and After School Care 6:30am until school starting time and 3:00pm until 6:30pm			
<input type="radio"/>	<input type="radio"/>	1 day per week at \$117.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	2 days per week at \$224.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	3 days per week at \$322.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	4 days per week at \$410.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	5 days per week at \$470.00 per month	
<input type="radio"/>	<input type="radio"/>	Drop In Care (subject to availability) AM-\$14 PM-\$25 1/2 day-\$30 All Day-\$60	

MIDDLE SCHOOL

I would like to enroll my child/children in the following plan:

1st Child	2nd Child	2:40pm until 6:30pm	Circle Day(s) Needed
<input type="radio"/>	<input type="radio"/>	1 day per week at \$111.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	2 days per week at \$212.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	3 days per week at \$302.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	4 days per week at \$377.00 per month	M T W Th F
<input type="radio"/>	<input type="radio"/>	5 days per week at \$446.00 per month	
<input type="radio"/>	<input type="radio"/>	Drop In Care (subject to availability) PM-\$27 1/2 day-\$39 All Day-\$60	

A 10% discount is given for each additional sibling enrolled in the program.

*10% discount does not apply to drop in care.

(continued on back)

Parent-Center Contract

2011-2012 School Year

Child's Name: _____

I understand that by signing this contract, I agree to abide by the following policies and procedures, as well as those listed in the KidsCo Parent Handbook. I also understand that failure to adhere to these policies/procedures could result in the dismissal of my child/children from the KidsCo program. I understand that photographs of my child may be taken for promotional usage.

- Tuition is based on an annual fee and is payable in 10 monthly installments. No credits or refunds are issued for missed days.
- I agree to pay my tuition by the 15th of each month **prior** to the month of service. Tuition that has not been paid by the first day of the month of service will jeopardize the enrollment status of my child (children). I further understand that my child will not be readmitted to the program until space is available and all fees, including late fees, have been paid. In addition, I shall be responsible for any attorney or collection fees required to collect unpaid tuition and/or any other outstanding charges which may include late tuition fees, late pick-up fees, or optional activity fees.
- I agree to escort my child into the center in the morning and sign him/her in at the designated location, and then to sign him/her out again when he/she is picked up in the evening.
- I agree to treat the KidsCo team members, as well as all children at the center, with respect and consideration.
- I agree to follow all KidsCo rules and policies, whether they be included in the Parent Handbook or posted at the center.

PARENT/GUARDIAN SIGNATURE

DATE

PARENT/GUARDIAN PRINTED NAME

PARENT RESPONSIBLE FOR PAYMENT OF FEES SIGNATURE

DATE

PARENT RESPONSIBLE FOR PAYMENT OF FEES PRINTED NAME

Thank you for choosing KidsCo!

KidsCo, Inc.
7620-J Rickenbacker Drive
Gaithersburg, MD 20879

www.KidsCoOnline.com • (p) 301.740.9600 • (f) 301.740.9611



KidsCo, Inc.
2011-2012 SCHOOL YEAR
7620-J Rickenbacker Drive, Gaithersburg, MD 20879
Office (301) 740-9600 ~ Fax (301) 740-9611

**IF YOU WISH TO PAY THE \$25 REGISTRATION FEE BY CREDIT CARD
PLEASE FILL OUT THE INFORMATION BELOW**

Yes, I wish to pay the one time registration fee by credit card.

Name of child/children _____

I authorize KidsCo, Inc. to charge the \$25.00 Registration Fee to my credit card.

Cardholder's Name (**PRINT**) _____

Cardholder's Address _____
_____ Zip Code _____

Card # _____ Expiration Date: ____/____/____

Security Code: _____

Card Type **VISA** **MasterCard** **Discover**

I authorize KidsCo, Inc. to charge the above to my credit card:

Cardholder's Signature

PLEASE INDICATE YOUR DESIRED PAYMENT METHOD FOR THE 2011-2012 SCHOOL YEAR BELOW

- I wish to make my school year payments and any outstanding charges each month by **credit card**, charged on the 15th of each month. (Supply credit card information below).
- I wish to make my school year payments and any outstanding charges each month by **EFT**, charged on the 15th of each month. (Copy of voided check must be included).
- I wish to receive my school year invoices by **email** each month, making my payments securely online.
Email Address: _____
- I wish to receive my school year invoices by **mail**, and will manually remit payment by check, cash, money order or call in a credit card number to the KidsCo Main Office.

Name of child/children _____

Cardholder's Name (**PRINT**) _____

Cardholder's Address _____
_____ Zip Code _____

Card # _____ Expiration Date: ____/____/____

Security Code: _____

Card Type **VISA** **MasterCard** **Discover**

I authorize KidsCo, Inc. to charge the monthly school year tuition and any outstanding charges to my credit card:

Cardholder's Signature