

Trinity Learning Center - TLC
425 Magnolia Road
Pinehurst, NC 28378
910-215-5775
TrinityCF.net

“Train up a child in the way he
should go; even when he is old he

FAMILY INFORMATION
ALL INFORMATION IS REQUIRED

Today's Date _____

CHILD'S FULL NAME _____

Child's Date of Birth _____

Home & Mailing (if different) Address _____

City _____ State _____ Zip Code _____

MOTHER'S NAME _____

Cell Phone _____ Work Phone _____

Email Address _____

FATHER'S NAME _____

Cell Phone _____ Work Phone _____

Email Address _____

WHO, OTHER THAN A PARENT, IS ALLOWED TO PICK UP YOUR CHILD?

(Photo ID required for pick-up)

Name(s): _____

EMERGENCY CONTACT (Photo ID required for pick-up/release from TLC care)

Name(s) _____

Relationship _____ Phone Number _____

Name(s) _____

Relationship _____ Phone Number _____

MEDICAL INFORMATION

CHILD'S NAME _____

MEDICAL TREATMENT INFORMATION

Child's Insurance Information _____

Child's Doctor's Name and Office _____

Doctor's Phone Number _____

Does your child have Allergies, Medical Conditions or Special Needs? If YES, explain:

REGISTRATION

CHILD'S NAME _____

Fall 2024-Spring 2025

1. My child will be _____ Years _____ Months old, on 8/31/2024.
2. The registration fee for returning families is \$75/family or \$150/family for new families.

Registration Amount Paid \$_____ Date _____

ABOUT MY CHILD

Today's Date:_____

Eating Habits/Dietary Concerns/Allergies:

Specific Fears (dark, loud noises, dogs, etc.):

Siblings (name, age, M/F):

Pet's: (name, dog/cat, M/F)

Play and Toy Preference (loves dinosaurs, dolls, cars, loves outdoors, water, etc.)

Anything else you would like us to know about your child (not noted elsewhere)

RELEASES & POLICIES

CHILD'S NAME _____

Please initial EACH LINE indicating that you agree with our Releases and give us Permissions:

_____ I have been provided a copy, have read and agree to the Trinity Learning Center (TLC) Handbook guidelines.

_____ I give my permission for my child's photo to be used for TLC promotional material. No last names will be used unless parents give written permission prior to publication.

_____ I give my permission for my child to be taken for walks, rides in the Bye-Bye Buggies, participate in the Pinehurst Splash Pad activity and/or swimming in the little swimming pools on the TLC premises, and play on any playground equipment on or off premises while in the care of the TLC employees.

_____ I do release Trinity Christian Fellowship and Trinity Learning Center, Pinehurst, North Carolina, and its agents, from all liability for injury or accident, and do give my permission to the TLC and/or church staff and employees to secure medical attention should the need arise.

Please initial EACH LINE indicating that you agree and understand our Tuition/Registration Policies:

_____ The Registration Fee(s) are non-transferable and non-refundable.

_____ The Registration Fee must be paid before your child's slot is reserved.

_____ Tuition will be charged whether your child attends class or not (vacations, doctor appointments, etc).

_____ The tuition amount has been calculated and has been set for the entire school year. Consideration has been taken regarding holidays and breaks and are factored into the tuition. No changes or adjustments will be made; I understand and agree that all monies are non-transferable and non-refundable.

_____ Tuition is due on or before the first day of the month.

_____ **LATE TUITION FEES:** If tuition has not been paid by the 7th day of the tuition month, a late fee of \$20 will be applied to your account. For tuition that has not been paid and has already assessed a \$20 late fee, you will continue to be charged \$5 per day until payment has been made.

_____ **LATE PICK UP FEES:** If you're more than 10 minutes late for pick up, a \$10 late fee will be applied to your account. Late fee balances for any reason, over \$50 will result in termination and your child's place will be given to another family.

Parent's Printed Name _____

Parent's Signature _____ Date _____

Teacher's Printed Name & Signature _____ Date _____