



SHIOCTON CHILD CARE CENTER

N5650 Broad St, P.O. Box 68, Shiocton, WI 54170-0068
(920) 986-3351 Ext. 790 • Fax (920) 986-3291

Enrollment Checklist

Child's Name _____ **DOB** _____

The following forms/items must be completed prior to your child's first day and returned to the Shiocton Child Care Center with the registration and weekly fee.

_____ Enrollment Forms:

Y/N	Forms to be Completed
	Child Care Enrollment Form
	Child Care Intake for Child Under 2 Years
	Child Health Report (Within 90 Days after first day)
	Day Care Immunization Record or an electronic record of Child's Immunizations
	Emergency Contact Card
	Health History and Emergency Care Plan
	Signed Contract with Weekly Schedule

_____ Parent Handbook Acknowledgement (Read and return signage page to SCCC)

_____ Registration Fee (\$50 for Individual / \$80 for Family)

_____ First Week's Regular Fee for Child Care

"Where Excellence is Expected"

The School District of Shiocton does not discriminate on the basis of race, sex, color, age, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional or learning disability.