

Hilltop Children's House **Application Form** 2019-2020

Applying for:	Children's House		Monday-Friday 8:30 am - 11:30 am			
Student Data						
Legal Name: Last			First		Middle	
Nickname	Sex	М	F			
Date of Birth						
Home Address		City		State	Zip	
Home Telephone						
Cell Phone where official sch	ool texts can l	be sent				
Email where official school co	ommunicatior	n can be	e sent			
Please list child's strengths a	nd interests:					
Please share any information medications, or family situat	=	ke us to	know includii	ng special needs, a	llergies,	
Religion:						
Why are you interested in ha	aving your chil	d atten	d Hilltop Child	ren's House?		
How did you hear about Hillt	cop Children's	House	P			

Family Background

Mother Father

Parent/Legal Guardian Full Name

Maiden Name N/A

Address

City, State, Zip

Cell Phone

Work Phone

Email Address

Parents/Legal Guardians are: Married Separated Divorced Single Parent

Other

Custody of Student: Both Mother Father Other

If "Other" please explain:

Tuition

Name of Person(s) Responsible for Tuition:

Address

City, State, Zip

Payment: Check PayPal Direct Deposit Cash

In full: \$1,400 payment due by August 1, 2019

In 2 equal payments: 2 payments of \$700 due by August 1, 2019 and February 1, 2020

In 10 equal payments: 10 payments of \$140 due by the 1st of August through April

Financial assistance is available based on need. If you would like to apply for financial assistance please submit a copy of your 2018 Federal Tax Filing with this application.

IMPORTANT NOTE: Child must be potty trained before first day of classes