



Sunshine Smiles

ACADEMY

Sunshine Smiles Academy
2611 Broad Street
Durham, North Carolina 27704
919-317-1500

Registration Process

Thank you for your interest in Sunshine Smiles Academy. We take your decision seriously and know that choosing a quality child care program is of utmost importance. Our staff is committed to the responsibility of caring for your most precious "possessions".

To register your child, please return this form to SSA (Sunshine Smiles Academy) with your \$75.00 fee per child. Please note that the registration fee is non-refundable.

As we receive your registration form and fees, we will start the enrollment process. Prior to enrollment, the center's director(s) will schedule a time for you to meet with your child's teachers, review policies, and sign parent/sponsor contracts.

PLEASE "PRINT" LEGIBLY

Child's Name: _____ **DOB:** _____

Parent / Guardian Name: _____ ***NCDL#:** _____

Relationship: _____ ***SSN#:** _____

Home#: _____ **Cell#:** _____

Employer: _____ **Business#:** _____

Email address: _____

Scheduled Desired: (Circle One & Explain Hours)

Part Time	Full Time	Emergency Drop In
_____	_____	_____

Parent / Guardian Signature: _____ **Date:** _____

Referred by: _____ **Wait List Fee received:** _____

Registration fee received _____ **Start Date:** _____

** This information is required for payment purposes upon enrollment.*

Thank you for choosing Sunshine Smiles Academy