



## WHO'S KEEPING THE KIDS?

Play Keepers is a non-profit organization that has been providing quality child care since 1983. We are dedicated to providing quality supplemental care to children of families that need this service. We provide supervised care after school hours.

Play Keepers functions within the purview of the code of Maryland Regulations 13A.14.02, governing Group Day Care Centers.

## KEYS TO OUR SUCCESS:

- Our program is based on the whole child's physical, emotional, social, and intellectual development
- Centers offer self-selected and planned activities in an enriching environment
- Our highly qualified staff exceeds the state requirements for education and experience
- We encourage parents to visit the center and participate in activities with their children
- Low staff turnover – our staff has been with us for an average of seven years.

P.O. Box 32673  
Baltimore, MD 21282  
410.484.6220  
[www.PlayKeepers.com](http://www.PlayKeepers.com)

*Providing a Safe, Fun, Nurturing Environment for Children in Our Care*



P.O. Box 32673  
Baltimore, MD 21282  
410/484-6220

## Easy Registration Process

If you are interested in enrolling your child in our program, please follow the easy steps listed below. Because we are a licensed program, each center has a limited number of openings. If you know that you will need our services, we urge you to complete this registration process *as soon as possible*. When we receive your registration form, we will send you a letter stating whether you have been accepted into the program or placed on a waiting list.

**Step 1** Complete the registration form and payment agreement *as soon as possible* and return it with a non-refundable registration fee of \$45 per child and a \$100 deposit per family that will be applied to your June, 2017 payment. If your child is withdrawn from the program prior to May 1, 2017, your deposit will be applied to your final payment. **Families withdrawing after May 1, 2017 will forfeit their deposit.** Mail forms and a check or money order to the above address. This will reserve your space in the program or position on the waiting list.

**Step 2** Complete the following forms and return them to our office at the above address. Please note that **ALL** of the forms listed below must be completed and on file **BEFORE** your child may attend.

Health Inventory Part I	Completed by parent
Health Inventory Part II	Completed by child's physician
Emergency Card	Completed by parent
*Medication Authorization Form	Completed by parent

**Step 3** If your child has any special needs of which we need to be aware, please call our office.

**Step 4** You will receive a letter of confirmation and a payment book in the mail.

Thank you for your interest in Play Keepers, Inc.  
We look forward to serving your family in the school year ahead!

\*Only if your child is taking medication that may need to be administered during Play Keepers.



## REGISTRATION FORM

Child's Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: MALE / FEMALE

Child's Home Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Cellular #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Cellular #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Siblings (Names and Ages): \_\_\_\_\_

Please indicate sessions needed:

<input type="checkbox"/> Before School	(7am – 9am)	<input type="checkbox"/> Monday
<input type="checkbox"/> After School	(3:45pm – 6pm)	<input type="checkbox"/> Tuesday
<input type="checkbox"/> Before Pre-K	(9am – 12:45pm)	<input type="checkbox"/> Wednesday
<input type="checkbox"/> After Pre-K	(11:30am – 3pm)	<input type="checkbox"/> Thursday
		<input type="checkbox"/> Friday

Return this registration form, the signed Payment Agreement, **and both** a non-refundable Registration Fee of \$45 per child and a \$100 deposit per family to:

Play Keepers, Inc.  
P.O. Box 32673  
Baltimore, MD 21282

## PLAY KEEPERS, INC. PAYMENT AGREEMENT

The parent(s) or legal guardian(s) of \_\_\_\_\_  
Full name(s) of child/ren

agree to pay Play Keepers, Inc. all necessary payments to ensure the continued admittance of your child/ren into our Play Keepers program.

The parent(s) or legal guardian(s) accept and promise to pay all monthly child care fees as stated in the monthly fee schedule. All child care fees are due and payable upon the **first** day of each month. A late fee in the amount of fifteen dollars (\$15.00) will be assessed and added to the account if the monthly child care fee is received after the **fifth** day of the month.

If child care fees remain unpaid after **30 days**, then Play Keepers, Inc. may prevent child/ren from attending the program until all current and unpaid balance is fully paid. If child care fees remain unpaid after **30 days**, Play Keepers, Inc. may institute legal action to collect unpaid balance.

**Play Keepers, Inc. requires two weeks' notice of your intent to withdraw your child.** You must call our main office at 410-484-6220. You are responsible for payment of tuition during these last two weeks.

A copy of "A Parent's Guide to Regulated Child Care" is posted at each center.

By signing below, I give permission for Play Keepers to take pictures of my child. I understand that these pictures may be posted at the center or used in Play Keepers publications.

By signing below, I acknowledge receipt of the Play Keepers Parent Handbook.

I/WE HAVE READ THE ABOVE AND AGREE TO ITS TERMS BY SIGNING BELOW.

\_\_\_\_\_  
Print name of Parent/Guardian

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name of Parent/Guardian

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date