

MT. HOOD COMMUNITY COLLEGE  
CHILD DEVELOPMENT CENTER  
26000 S.E. STARK ST.  
GRESHAM, OR 97030  
503/491-7169

COMMUNITY/STAFF CHILD CARE WAITING LIST

Please complete all information requested. This form will be used to contact you when space is available for your child. Please complete one form for each child.

Date: \_\_\_\_\_ Term/Year care is needed: \_\_\_\_\_

Child \_\_\_\_\_ Sex \_\_\_ Age \_\_\_ Birthdate \_\_\_\_\_ toileting \_\_\_Y\_\_\_N

Parent \_\_\_\_\_ Parent \_\_\_\_\_

Family Address \_\_\_\_\_  
street city state zip

Telephone \_\_\_\_\_ Message Phone \_\_\_\_\_

ENROLLMENT AGREEMENT: Care must be scheduled for a minimum three hour block of time on each scheduled day. Children must arrive by 9:00 AM to provide continuity for the morning program, or at a scheduled time between 11:00 AM and 12:00 PM

Fees subject to change any time.

		Faculty/Staff/Community <u>Rate</u>
1 year-2 1/2 years	Up to 30 hours per week	\$200.00/week
	Over 30 hours per week	\$228.00/week
2 1/2 - 5 years	Up to 30 hours per week	\$175.00/week
	Over 30 hours per week	\$196.00/week

Weekly fees are based on the number of hours per week that your child is scheduled. The monthly tuition payment is due by the designated due date, appearing on the statement. A \$75.00 non-refundable fee (per family) will be due when space is offered.

\_\_\_\_\_  
Sibling:

\_\_\_\_\_  
Willing to take space for one child?

\_\_\_\_\_  
Notes: