



The Rose Garden

Child Application Form

Child's Name: _____

Date of Birth/Age: _____

My child will attend;

Gender: _____ Nickname: _____

Full-time _____ Part-time _____

Address: _____

Year round _____ School year _____

City: _____ Zip: _____

Other: (explain) _____

Father's Name: _____ **Mother's Name:** _____

Address (if different): _____ Address (if different): _____

City: _____ Zip: _____ City: _____ Zip: _____

Father's Occupation: _____ Mother's occupation: _____

(H) _____ (H) _____

Phone: (W) _____ Phone: (W) _____

(C) _____ (C) _____

E-mail address: _____ E-mail address: _____

(Email addresses are to receive the school newsletter, snow closing information and invoices)

Name of Child's Physician: _____ Phone: _____

Name, Relationship and Phone of persons authorized to pick up the child:

Persons to be notified in case of emergency, when parent isn't available:

Name/ Relationship: _____ Phone: _____

Name/ Relationship: _____ Phone: _____

Illnesses, accidents, and surgery child has had (please include childhood diseases and specify allergies): _____

257 Lafayette Ave. Buffalo NY 14213 716.816.0078

www.therosegarden.us

frizlen@therosegarden.us



The Rose Garden Early Childhood Center Fee Schedule

I have read the Tuition Schedule, and understand that the fee is due on or before the 1st of the month. If I fail to pay by the 15th of the month and do not make other arrangements with the Administrator, my child's place will become available to children on the waiting list.

I agree to pay in advance: Monthly _____ Bi-weekly _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

I understand I may be assessed an additional charge if my child is picked up later than the agreed upon hour.

I understand that by signing this application I grant The Rose Garden Early Childhood Center permission to photograph my child and to use these images in any medium for educational, promotional, advertising, or any other legal purposes that support the mission of the Center.

I understand that the center will closed for the last two weeks of August and between Christmas and New Year, as well as national holidays.

Tuition Schedule

Hours of child care offered: 8:00 a.m. – 4:00 p.m. (minimum 4 hours).
Arrival no earlier than 7:45 a.m. and pick-up no later than 4:30 p.m.

Full Days – 8 hours (8:00 a.m. – 4:00 p.m.)

Toddlers (18 months – 36 months)

Five Full days: \$1,030.00 a month

Three Full days: \$670.00 a month

Two Full days: \$465.00 a month

Preschoolers (3-4 years old) and Kindergartners (4 – 6 years-old)

Five Full Days: \$910.00 a month

Three Full Days: \$570.00 a month

Two Full Days: \$370.00 a month

Half Days – 4 hours (8:00 a.m. – noon)

Toddlers (18 months – 36 months)

Five Half Days: \$620.00 a month

Three Half Days: \$370.00 a month

Two Half Days: \$260.00 a month

Preschoolers (3-4-year-olds) and Kindergartners (4 – 6 years-old)

Five Half Days: \$515.00 a month

Three Half Days: \$360.00 a month (Minimum Kindergarten attendance)

Two Half Days: \$260.00 a month (Preschool only)

Other schedules and fees (between 4 and 8 hours) available upon request.

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