



TENDER LOVING

Care Childcare Centers

23 Warren Ave Suite 180 Woburn, MA 01801 (781) 281-2983

101 River Rd Weston, MA 02493 (781) 703-5088

Parent #1 Name: _____

Email Address: _____

Parent #2 Name: _____

Email Address: _____

Address: _____

Cell Phone: _____ Work Phone: _____

Child's Name: _____ Date of Birth: _____

Date of preferred enrollment: ____/____/____

Location (circle): Woburn Weston

Days Needed (circle): Monday Tuesday Wednesday Thursday Friday

Hours Needed: _____

How did you hear about us? _____

Has your child ever been in childcare? If yes.... where? _____

Upon enrollment this form should be returned with a one-month deposit

Deposit Amount \$ _____

Deposit is non-refundable _____ (please initial)

Signature _____ Date _____