



**ALL DAY CARE - GRACE ROAD 2025**

Location: 4618 Black Rock Road – Upperco, Maryland 21155

Child's full name \_\_\_\_\_ Birth Date \_\_\_/\_\_\_/\_\_\_  
Parent's Name(s) \_\_\_\_\_ Sex: Male Female  
Home Address(with city and state) \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Work phone \_\_\_\_\_ Registration Fee (once/year) \$80 \_\_\_\_\_

Enrollment Preference: please check and circle Start Date: \_\_\_\_\_

**Check one:**

**Circle one:**

- |                                  |                 |
|----------------------------------|-----------------|
| _____ 2 - 5 Year Old – full time | (\$317.00/week) |
| _____ 2 - 5 Year Old – 4 days    | (\$258.00/week) |
| _____ 2 - 5 Year Old – 3 days    | (\$200.00/week) |

Days attending: \_\_\_\_\_  
Parents: \_\_Single \_\_Married \_\_Domestic Partners \_\_Separated \_\_Divorced  
Child is in custody of: \_\_Both parents \_\_Mother \_\_Father \_\_Other \_\_\_\_\_  
Name(s)/ages of siblings: \_\_\_\_\_  
Parental signature: \_\_\_\_\_ Date of Application \_\_\_/\_\_\_/\_\_\_

- Hours: Monday – Friday: 7:00 am – 6:00 pm
- Discounts: 10% off second child Full time \*lowest tuition – see director
- Payment is due MONDAY of a week of care

For Office Use Only	
Date rcvd _____	BW _____ regis fee check _____ BW _____ cash _____
Welcome sent _____	alert billing _____ attendance base _____ data base _____