



ELIZABETH MASCIA CHILD CARE CENTER

171 Sheldon Avenue • Tarrytown, NY 10591
914.631.2126 • 914.631.2239.fax • emccc171@verizon.net

Infant Center 174 Valley Street • Sleepy Hollow, NY 10591
914.703.6452 • 914.703.6496.fax • emccc174@verizon.net

Application for School Age Program

\$30 REGISTRATION FEE

Date:

Child's Name: Nickname:

Address: Phone:

Date of Birth:

School Now Attending:

Current Grade:

Address: Phone:

I would like to enroll my child in the following Program(s):

Before School: Days Needed:

After School: Days Needed:

Camp: Days Needed:

Family Composition

NUMBER IN HOUSEHOLD Adults: Children:

	MOTHER	FATHER
Name:		
Marital Status:		
Occupation:		
Employer:		
Address:		
Telephone:		
Email:		
Work Hours:		



Signature of Parent or Guardian: