

3. Relationships with other children? _____
4. Recent changes in home environment? (new home, new baby, etc.)

5. What are your child's strengths? _____
6. Do you have any concerns regarding your child's behavior/development?

7. Does your child have any special fears at home? (thunder, dark, dogs)

8. Favorite books, toys, activities: _____
9. General Health:
 illness/hospitalizations _____
 medications _____
 food or environmental allergies _____

Early Childhood Learning Center

TUITION POLICY

- Tuition is based on a monthly fee of:
- **\$400.00 per student for Monday through Friday 8:30-2:30 Class**
- There is a \$40 – non-refundable registration fee, due with this application
- All Checks are to be made payable to Don Mills Achievement Center
- Tuition is due the last week of class each month
- Tuition is **not** adjusted for absences due to illness, holidays, vacations, or weather-related cancellations

I give my permission to:

- I Allow Don Mills Achievement Center to use my child's photograph for publicity purposes in all forms of media. This includes things such as newspaper, Facebook, etc.
 _____ yes _____ no

I have read the above statements regarding publicity, insurance, and tuition procedures and in agreement as stated.

Signature

Date