



Play Centers, Inc.
1517 York Road
Lutherville, Maryland 21093-5611
Phone: 410.296.4880 / Fax: 410.296.0803
Federal Tax I.D. Number: 52-1259566
Website: www.playcenters.org

VERIFICATION OF ENROLLMENT FORM **for the _____ - _____ School Year**

My child, _____, is/will be enrolled as a
(Child's Full Name)
student in the school where I am requesting child care services offered by
Play Centers, Inc.

NOTE: If your child is not enrolled as a student where you are requesting child care services from Play Centers, Inc., then Play Centers, Inc. can not enroll your child in the child care program at the school you requested. Please contact the Principal of the school to enroll your child as a student prior to contracting for child care services with Play Centers, Inc.

If you have any questions or concerns regarding this matter, please contact our Main Office at 410.296.4880.

Thank you in advance for your cooperation with this matter.

I (We) have read and understand the above information. I hereby certify that the information contained in this form is true and accurate.

Parent/Guardian #1:

_____/_____/_____
Signature (Seal) Date

Print

Parent/Guardian #2:

_____/_____/_____
Signature (Seal) Date

Print

Disclaimer: Any child enrolled in a Play Centers, Inc. child care program who is not enrolled as a student at that location will be immediately dismissed from the child care program. Any deposit money will be forfeited. The school office will be immediately informed of the termination of child care services.