



**Bethlehem Early Learning Center 2020-2021 Enrollment Application**

155 Linwood Avenue, Ridgewood, NJ 07450 - Tel. (201) 444-6678 - Fax (201) 444-7087

Are you a member of Bethlehem Lutheran Church? \_\_\_Yes \_\_\_No

If not, do you have a church? \_\_\_Yes \_\_\_No Where? \_\_\_\_\_

Do you have other children? \_\_\_Yes \_\_\_No Names & Ages: \_\_\_\_\_

How did you hear about our school? \_\_\_\_\_

**Emergency Contact Information**

Please provide 2 local contacts that can be responsible for picking up your child **within 10-15 minutes** in the event you cannot be reached. (i.e., grandparents, neighbors, friends, aunts, uncles)

**DO NOT LIST PARENTS AS EMERGENCY CONTACTS**

1.) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2.) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name of Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

Please print the information exactly the way you want it to appear in our school directory. If left blank your child's name will not be listed in the directory.

Child's Name: \_\_\_\_\_

Parents' First Names: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Please sign below if you approve of having your child's photograph appear in BELC brochures, BELC website, BELC FaceBook page or in the local town paper.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**A \$75.00 non-refundable registration fee plus one month's security deposit must accompany this application in order to process enrollment application.**