



Panda Bilingual Daycare Application Form

First Name	Middle Name	Last Name	Preferred Name
Date of Birth	Preferred Start Date	Gender	Primary Language

Parent/Guardian 1 Information

Name	Relationship		
Home Address	City	State	Zip
Company Name	Occupation		
Company Address	City	State	Zip
Primary Phone (cell/home/work)	Secondary Phone (cell/home/work)	E-mail	

Parent/Guardian 2 Information

Name	Relationship		
Home Address	City	State	Zip
Company Name	Occupation		
Company Address	City	State	Zip
Primary Phone (cell/home/work)	Secondary Phone (cell/home/work)	E-mail	

Are Parents living together? _____ If no, to whom should mail be addressed? _____

Siblings

Name	Date of Birth	Current School
Name	Date of Birth	Current School
Name	Date of Birth	Current School

Please feel free to include any information about your family that you think is important for us to know:

How do you hear about Panda Bilingual Daycare? _____

Program Option

___ 5 Days Program (8:00am - 6:00pm)

___ Part time Program (8:00am - 6:00pm) _____ 2, 3, 4 Days/week (circle) M T W Th F

Additional Information

Child's Physician: _____

Address: _____ Phone Number: _____

Allergies/Special Diets? _____

Individual Health Plan for child with a chronic health condition? If yes, please attach. _____

Copies of any custody agreements, court orders, and restraining orders pertaining to the child? If yes, please attach. _____

Special limitations or concerns? _____

Child's previous group experience (please include any play group, Sunday school, or previous nursery school):

I wish to apply for the enrollment of this application in the Panda Bilingual Daycare. I understand and agree that any information gathered by the Admission Office in connection with this application shall be strictly confidential and shall not be disclosed to anyone. I certify that the information presented with this application is accurate, complete, and accurately presented.

After this form is returned, your child will be considered for enrollment to the school. A \$75 non-refundable application fee must accompany this application.

Signature of Parent or Guardian_____ Date_____

Please return this enrollment form, application fee and deposit to:

Panda Bilingual Daycare
30 Cambridgepark Drive
Cambridge, MA 02140

Please contact us with any questions at:
Telephone: 857-706-1185
Email: pandabilingual@gmail.com