

**CHILDREN, YOUTH, AND TEEN PROGRAMS
CHILD DEVELOPMENT CENTER
DOCUMENTATION REQUIRED FOR REGISTRATION**

Child's Name _____ DOB _____
 Teacher's Name _____ Classroom _____
 Enrolled In _____ Start Date _____

Please return this packet and the needed documents to the Resource and Referral Office BLD 5082. 257-2535

****Sponsor will need to sign the Program Agreement at time of registration.**

Please call the program you are enrolling your child in to schedule an orientation appointment.

Kupulau Child Development Center 257-1388

Olina Child Development Center 257-8354

Youth Activities 254-7610

PROGRAM CHECKLIST

Date

Copy of Immunization Record (including TB test)		
Family Care Plan (if applicable)		
Power of Attorney (if applicable)		
Physical /Health Assessment (Well Baby)		
Information Questionnaire		
App. For DoD Childcare Fees (Form 2652)		
LES and/or Paystub		
Parent Volunteer Form (if applicable)		
Special Permissions Form		
Other:		

Signature on the line below denotes that all provided registration paperwork has been completed and/or returned.

Parent Signature

Date

For Office Use Only

Notes:
CYTP Membership Fee Received on:
Date Paperwork Received:
Name of CYTP Official: