



## Request for Early Education and Child Care

Thank you for your interest in early education and child care at  
Rainbows United, Kids' Point, 3223 North Oliver Avenue.

The following information will be helpful in understanding your child care needs. Please complete this form and return it to Rainbows at your earliest convenience. Upon receipt of this request and as soon as an opening becomes available, our Admissions Department will contact you. Thanks again and we look forward to hearing from you!

Child's Name \_\_\_\_\_  
Child's Name \_\_\_\_\_  
Desired Start Date \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Date of Birth \_\_\_\_\_

**Hours I will be needing child care services are**  
Arrival Time \_\_\_\_\_

Departure Time \_\_\_\_\_

### Parent Information

Mother's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Employer \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

Father's Name \_\_\_\_\_  
Employer \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

**My \$25 registration fee (non-refundable) is enclosed.**

Foster parents need only to return a copy of the Foster Parent Placement Agreement.

For office use only Date: _____ Initials: _____
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Please return this form and fee to:  
Admissions Department  
Rainbows United, Inc., Kids' Point, 3223 North Oliver Avenue, Wichita, Kansas 67220