

LABOR AND INDUSTRY PARENTS' ASSOCIATION
APPLICATION FOR ENROLLMENT IN CHILD CARE CENTER

Please complete all information and send the application along with your \$50 non-refundable application fee to the following address:

Janice Bickel, Enrollment Coordinator
651 Boas Street - Room E-150
Harrisburg, PA 17120

Please make checks payable to the L&I Parents' Association (LIPA). Individuals wishing to enroll a child in the Labor and Industry Child Care Center Care are required to maintain membership within the Parents' Association.

Annual dues are \$35 and are collected each year in January. Payment of annual dues is required for maintenance on the enrollment waiting list. You may contact Janice Bickel at (717) 772-1469 or jabickel@pa.gov with any questions.

All families with a child enrolled in the Labor and Industry Child Care Center are required to participate in fundraising activities for the LIPA or to pay an annual Opt-Out fee.

COMMONWEALTH EMPLOYEE/SPONSOR INFORMATION

Date of Application:	
Employee Name:	
Employee number: (Needed to verify Commonwealth employment)	
Dept/Agency:	
Work address:	
Work phone:	
Work e-mail address:	

Do you anticipate working more than 750 hours per year? ☐ Yes ☐ No

(Needed to verify eligibility for enrollment; must maintain 750 hours worked annually to maintain eligibility for enrollment in Child Care Center. Please note that only Commonwealth Employees may use this center.)

Employee's relationship to child:
<input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Aunt/Uncle <input type="checkbox"/> Legal Guardian

PARENT/CHILD INFORMATION

Name of parent(s):	
Home address:	
Home phone:	
Home e-mail address:	
Parent cellular number:	
Child's name:	
Child's Date of Birth:	

ENROLLMENT INFORMATION

Requested Start Date for Child:	
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<input type="checkbox"/> Full-time (4-5 days per week)	
<input type="checkbox"/> Part-time (2-3 days per week)	Select Days: <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Th <input type="checkbox"/> Fri

Approximate arrival time:		Approximate departure time:	
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Note special needs of child, including food allergies/dietary restrictions, if any:

Is your child Eligible for the subsidized Child Care Works Program? ☐ Yes ☐ No ☐ Don't Know

All members of the Parents' Association are required to volunteer/state interest for one of the Associations' service committees. When an opening for the specified committee comes up, you will be contacted. Please indicate committee(s) on which you would be willing to serve:

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|--|--|---|--------------------------------------|
| <input type="checkbox"/> Provider Screening | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Teacher Appreciation | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Equipment/Inventory | <input type="checkbox"/> Safety | <input type="checkbox"/> Handbook | <input type="checkbox"/> Finance |
| <input type="checkbox"/> Other: | | | |

Please Note: All L&I Parents' Association members are required to adhere to Association By-Laws and Handbook policies.

For Administrative Use Only:

Date Received:	
Enrollment Code:	
Class:	
Enrollment Date:	
Notes:	