



EARLY LEARNING CENTER

Application for Enrollment

STUDENT INFORMATION

Date Completed:

Child's Name:

Date of Birth:

Gender:

CONTACT INFORMATION

Mother's Name:

Father's Name:

Address:

City:

State:

Zip:

Primary Phone Number:

Emergency Phone Number:

Email Address:

A \$50.00 non-refundable application fee is required and to be paid online by clicking the link below.
[Early Learning Center Registration Payment](#)

For more information please
contact the AUM Early Learning Center
(334) 244 - 3441