



Early Learning Center

1271 East Maple Ave
Langhorne, PA 19047
(215) 752-8592

Registration Form

Date: _____

Child's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Date of Birth: _____

County of Residence _____

School District _____

Mother's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email _____

Father's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email _____

Days Needed: M T W TH F

A non refundable registration fee of \$100 is due with your registration form (\$50 for waitlist)