



REGISTRATION FORM

For office use only:

Date of Enrollment _____

Date of registration: _____

Personal Information

Full Name of Child: _____ Gender: _____

Name Child Responds To: _____ Date of Birth: _____

Address: _____

Phone Number: _____

Mother's Name _____ Place of Employment: _____

Home Phone: _____ Work Number: _____

Cell Number: _____

Address (if different from child's) _____

Father's Name _____ Place of Employment: _____

Home Phone: _____ Work Number: _____

Cell Number: _____

Address (if different from child's) _____

Persons Authorized to Pick up Child (other than parents listed above)

1) Name: _____ Relationship: _____

2) Name: _____ Relationship: _____



Permission To Administer

No	Yes	Products	Brands
___	___	Diaper Wipes	_____
___	___	Diaper Cream	_____
___	___	Chap Stick	_____
___	___	Antiseptic Wipes	_____
___	___	Baby Lotion	_____
___	___	Band Aids	_____
___	___	Neosporin	_____
___	___	Sanitizer	_____



Please List Medical Information

Medical Provider

Name: _____ Phone Number: _____

Address: _____

List All Allergies

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

List All Medications

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

In the event of an emergency, what hospital do you prefer your child transported to? _____

Please provide insurance information: Provider: _____

Policy Number: _____

Phone Number: _____



- Hours of Operation are 24 Hours
- DHS subsidy families, it is important that you sign your child in daily with a full signature; your signature that verifies your child attended on those days, if we are not paid by the state than we must be paid by you pays us.
- Tuition is due on Monday: all payments must be received on Thursday before close.
- A \$25.00 late fee will be applied after Thursday.
- A Registration fee of \$50 for a single child & \$100.00 family is due upon enrollment, and a notice will be given about the summer fee There is also a \$35.00 materials fee that all due upon enrollment. These fees are due every year of enrollment.
- If you come in at a time when the fall registration fee is being waived, you will pay the fee in July, when be applied for late pick up.
- A \$35.00 fee will be charged for any returned checks,
- Private Pay families: when your child/children are out for vacation. Half of the tuition for the week must be paid before your leave.
- All unpaid balances will be sent to collections for non-payment.
- All DHS subsidy paying parents must pay tuition, even when your child is out.
- A two weeks notice must be given prior to last day of attendance, if you fail to do so, you will be responsible for payments.

Name _____

Date _____

KEEP ME HOME IF...

- I have a rash or head lice.
- I'm vomiting.
- I have a fever.
- I have a sore throat.
- I'm just not feeling very good.
- I have diarrhea.
- I have an eye infection.

When Your Child is Sick:

1. Have plans for back up childcare.
2. Tell caregiver what is wrong with your child, even if your child stays home.





Understanding My Child

You could probably list a million ways your child is special and unique. Please share a few of those details, so we can make your child's time with us special fun, and rewarding for all of us!

My Child's Name _____ Age _____

Days spent with us:

Monday__ Tuesday__ Wednesday__ Thursday__ Friday__

A few of my child's favorite things:

Foods _____

Colors _____

Activities _____

Cartoon/literary Characters(s) _____

Book _____

Toy/Object _____

Anything you would like us to know about your child _____

