

# CHILD ENROLLMENT FORM

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Child's Nickname \_\_\_\_\_ Age at Entry \_\_\_\_\_

**Any allergies?** [ ] Yes [ ] No **If yes, please complete an allergy care plan.**

**Any chronic health issues?** [ ] Yes [ ] No **If yes, please complete a written care plan.**

Current medications? \_\_\_\_\_

Are there legal custody papers for this child? [ ] Yes [ ] No **If yes, a copy must be left in child's file**

Is anyone in your family currently in the military or national guard? [ ] Yes [ ] No

**Parent/Guardian Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Home Address \_\_\_\_\_ Cell \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Employer & Work Hours \_\_\_\_\_ Wk. Phone \_\_\_\_\_

Employer Address \_\_\_\_\_

**Parent/Guardian Name** \_\_\_\_\_ **Relationship** \_\_\_\_\_

Home Address \_\_\_\_\_ Cell \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Employer & Work Hours \_\_\_\_\_ Wk. Phone \_\_\_\_\_

Employer Address \_\_\_\_\_

## Required Emergency Contacts (other than parent/guardian)

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

## Non-Emergency Contacts - additional people authorized to pick up child

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

## Medical Contact Information

Insurance Provider & Policy Information (if applicable) \_\_\_\_\_

Child's medical providers or emergency care facility \_\_\_\_\_

Phone \_\_\_\_\_

**In an emergency**, Happy Go Lucky Childcare has my permission to call an ambulance or transport my child to any available physician or hospital at my expense to obtain medical treatment. In most emergencies, 911 is called and the child is transported to the nearest hospital and treated by the on-call physician. The parent or guardian of the child must be notified as soon as possible.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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Has your child previously been in child care? [ ] **Yes** [ ] **No**

If yes, what type of care and for how long? \_\_\_\_\_

My child can participate in music class, offered by a contracted service provider. **Yes** **No**

## Parent/Guardian Authorizations

My child may be taken on neighborhood walks. [ ] **Yes** [ ] **No**

A signed permission slip is required for all field trips out of the neighborhood.

My child may use sunscreen. [ ] **Yes** [ ] **No**

My child may apply their own sunscreen under adult supervision. [ ] **Yes** [ ] **No**

My child may play in water and/or at the splash pad. [ ] **Yes** [ ] **No**

My child may ride in a wagon or stroller. [ ] **Yes** [ ] **No**

My child may be photographed and/or recorded for publicity or news purposes. [ ] **Yes** [ ] **No**

This applies to: [ ] **On-site** [ ] **Off-site** photography and video.

My child may participate in special occasions/celebrations including when food is served as part of the celebration. [ ] **Yes** [ ] **No**

I have reviewed a copy of this child care facilities current license certificate. [ ] **Yes** [ ] **No**

I have received a written copy of the program's child care policies. [ ] **Yes** [ ] **No**

## Child General Information

Is your child potty trained? [ ] **Yes** [ ] **No**

General likes and dislikes: \_\_\_\_\_

Eating habits and schedule: \_\_\_\_\_

Sleeping habits and schedule: \_\_\_\_\_

Developmental & health history that could affect the child's participation in child care:

\_\_\_\_\_

Interactions with other children: \_\_\_\_\_

How does your child like to be comforted: \_\_\_\_\_

Child's home language: \_\_\_\_\_

Are there family cultural backgrounds, traditions, beliefs or interests that you would like to share with us? \_\_\_\_\_

Does your child have any special needs (IFSP, IEP, etc.)? [ ] **Yes** [ ] **No**

If yes, when did services begin? \_\_\_\_\_

A copy of the child's IFSP or IEP must be given to the child care program during enrollment.

## Other Children in the Home

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# CHILD ENROLLMENT FORM

## Admission Form Agreement

1. Facility Use - I agree that subject to terms in this Agreement, other documents I sign, Happy Go Lucky Childcare will provide child care for my child.
2. Future Visits - This Agreement, this Enrollment Form and the Contract Form will be kept on file at Happy Go Lucky Childcare and will continue to constitute binding obligations for any future visits my child may make to Happy Go Lucky Childcare. However, this Agreement does not obligate Happy Go Lucky Childcare to continue to provide service, and Happy Go Lucky Childcare reserves the right to refuse admission to any child for any reason without liability.
3. Payments - Payment for Happy Go Lucky Childcare services will be due no later than the first of the month. Happy Go Lucky Childcare may refuse to accept any payment by check, and may charge a fee in the amount prescribed at the time of visit for each returned check. Payment is due per payment policy and all late fees per policy apply. We shall be entitled to recover all such time spent for all costs incurred in the collection effort, with or without suit. The client shall, in addition, pay all fees that are incurred with other attorneys or collection agencies, with or without suit, for the collection of costs owed by the client.
4. Health Policies
  - A. Health - My child is in excellent health and physical condition and has no medical, psychological, physical or mental conditions which have not been disclosed to Happy Go Lucky Childcare on the attached Enrollment Forms. My child does not have any infectious, contagious, or communicable diseases. My child is current on all required immunizations.
  - B. Illness - In the event that my child becomes sick with a contagious illness after visiting Happy Go Lucky Childcare and the visit to Happy Go Lucky Childcare occurred during the gestation period of such illness, I agree to notify Happy Go Lucky Childcare as soon as possible to enable Happy Go Lucky Childcare, in its discretion, to notify each family of all the children who may have been exposed to such illness.
5. Medical Procedures
  - A. General Medical Guidelines/Discretions- Although Happy Go Lucky Childcare tries to provide a safe environment, it is possible that my child may be injured. In such an event, I authorize Happy Go Lucky Childcare to follow its internal procedures, including simple first aid as reasonably appropriate, however, I understand that Happy Go Lucky Childcare shall not be required to strictly follow these guidelines when in Happy Go Lucky Childcare judgment circumstances may require otherwise.
  - B. Medical Authorization - In the event that Happy Go Lucky Childcare determines that medical emergency medical attention is necessary for my child, I authorize Happy Go Lucky Childcare to act as an agent for me and to give permission for my child to be attended by a physician and be transported by ambulance in such circumstances as Happy Go Lucky Childcare deems necessary.
6. Safety/Indemnity - I agree that Happy Go Lucky Childcare may take action which it considers prudent to protect the safety of my child, and other children visiting Happy Go Lucky Childcare. I further agree to indemnify, defend, and hold Happy Go Lucky Childcare (and its employees) harmless from and against all actions, claims, or liability including attorney's fees and court costs, directly or indirectly caused by my child or resulting from any inaccuracy or omission made by me in completing the Enrollment Forms.
7. Additional Requirements
  - A. As a condition to my use of Happy Go Lucky Childcare, I have accurately completed and signed the Enrollment Forms. I understand that Happy Go Lucky Childcare will rely on this information when caring for my child. I agree to update any changes to the information I have provided as changes occur and will provide new forms every twelve months including the Medical Emergency Form to comply with Child Care Division regulations.
  - B. I agree to pay all costs and attorney's fees arising out of any action relating to this agreement for collection purposes or otherwise.

**I HAVE READ THE ABOVE CAREFULLY AND I FULLY UNDERSTOOD THE CONTENT AND CONSEQUENCES OF THIS AGREEMENT BEFORE SIGNING.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

In any child care program, injuries may occur. In order for Happy Go Lucky Childcare to be able to provide services to you, it is necessary that you assume certain risks. Thus, as a requirement to receive our services, Happy Go Lucky Childcare is requesting that you sign this Release.

I, on behalf of myself, my spouse, and each child designated on the Enrollment Form Agreement (my "child"), waive and release all rights, causes of action and claims against Happy Go Lucky Childcare and its employees, for any and all loss of or damage to property or injuries suffered by my child during the time my child is visiting Happy Go Lucky Childcare, including the possible negligence of Happy Go Lucky Childcare, but excluding gross negligence and intentional misconduct. I understand that the provision of child care contains risk of injury to persons and damage to property, and that by signing this Release I engage Happy Go Lucky Childcare to provide day care for my child at my own risk.

I have been given the opportunity to ask any questions and obtain answers to my satisfaction regarding any and all aspects of Happy Go Lucky Childcare and this Release, including but not limited to future risks, complications and costs. By signing this Release, I have not relied on any promises or statements made by Happy Go Lucky Childcare Care other than those contained in the written information supplied to me by Happy Go Lucky Childcare.

I understand that this Release will be kept on file at Happy Go Lucky Childcare and will continue to be in effect for this and any future visits my child may make to Happy Go Lucky Childcare.

**I HAVE READ THE ABOVE CAREFULLY AND I FULLY UNDERSTAND THE CONTENT AND CONSEQUENCES OF THIS RELEASE.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_