

ISLE OF FAITH CHILD DEVELOPMENT CENTER

221-KIDS
(221-5437)

APPLICATION FOR ENROLLMENT

Please fill out this application completely. Accurate information is necessary so that we may best serve your child.
It is your responsibility to notify us immediately of any changes in employment, residence or pickup information.

Date of registration _____ Date enrollment is to begin _____
Mother's SS# _____ Father's SS# _____

CHILD INFORMATION

Child's full name _____ Name called by _____
Date of birth _____ Sex _____ Social Security # _____ Age _____
Home address _____ City _____ Zip _____ Phone _____
Child's Physician _____ Phone _____
Allergies _____

PARENT/FAMILY INFORMATION

Mother's name _____ Driver's License # _____
Employer _____ Occupation _____
Work hours _____ Work Phone _____ Cell Phone _____ Email _____
Father's name _____ Driver's License # _____
Employer _____ Occupation _____
Work hours _____ Work Phone _____ Cell Phone _____ Email _____
Child's Parents: Married Separated Divorced
If divorced, who has custody? _____ (please furnish a copy of the court order)
Is there a step-parent in the home? _____
Siblings: Brother (s) Name (s) Age (s) _____
Sister (s) Name (s) Age (s) _____
Adults other than parents living in the home _____

AUTHORIZED PICK UP INFORMATION

Who is authorized to pick up the child? (other than parents)

Name _____	Relationship to child _____	Phone _____
Name _____	Relationship to child _____	Phone _____
Name _____	Relationship to child _____	Phone _____
Name _____	Relationship to child _____	Phone _____

Who may **NOT** pick up the child? _____

GENERAL INFORMATION

Previous preschool experience _____
How did you find out about our program _____
Religious affiliation _____

As required by law, you are being notified that redirection or time-out are our methods of discipline.

I have received a copy of: KNOW YOUR CHILD CARE CENTER (CF/PI 175-24 6/02) and INFLUENZA VIRUS (CF/PI 175-70 6/09)

Date _____ Signature _____

Parent's signature acknowledges receipt of written disciplinary practices.

TOP COPY - COMPUTER COPY

BOTTOM COPY - CLASS TEACHER FILE