

## Registration Form

Child's Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Date Enrolled: \_\_\_\_\_  
Nickname: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ License # \_\_\_\_\_  
Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_  
Name of Employer: \_\_\_\_\_ Cell Phone or Pager: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Work Hours: \_\_\_\_\_  
Father's Full Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ License # \_\_\_\_\_  
Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_  
Name of Employer: \_\_\_\_\_ Cell Phone or Pager: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Parent/Guardian with legal custody: \_\_\_\_\_

Parents are: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed \_\_\_\_\_ Single \_\_\_\_\_

## About Your Child

1. What FOODS does your child especially like? \_\_\_\_\_
2. Especially DISLIKE? \_\_\_\_\_
3. Favorite toys, games, activities? \_\_\_\_\_
4. Is your child TOILET TRAINED? \_\_\_\_\_
5. How does your child express ANGER or frustration? \_\_\_\_\_
6. Does your child have any special FEARS? \_\_\_\_\_
7. When your child is upset, what helps to comfort him/her? \_\_\_\_\_  
\_\_\_\_\_
8. How do you DISCIPLINE your child? \_\_\_\_\_
9. Has your child been taking afternoon naps? \_\_\_\_\_ If so, how long? \_\_\_\_\_  
\_\_\_\_\_ If not, why? \_\_\_\_\_
10. Special toy or blanket for NAP? \_\_\_\_\_
11. Special FAMILY situations, i.e. custody specifications, problems arising from situations, etc.? \_\_\_\_\_
12. Anticipated ADJUSTMENT problems? \_\_\_\_\_
13. Any disorders/developmental (slow, advanced) diagnosed or suspected? \_\_\_\_\_
14. Previous daycare child has attended: \_\_\_\_\_
15. Any problems at previous daycare? \_\_\_\_\_
16. Your EXPECTATIONS of this facility: \_\_\_\_\_

## Emergency Contacts

(Within 20-mile radius of daycare other than parent or guardian)

Primary Emergency Contact (other than parent or guardian): _____
Home Phone: _____ Work Phone: _____
Relationship to Child: _____
Address: _____

Secondary Emergency Contact (other than parent or guardian): _____
Home Phone: _____ Work Phone: _____
Relationship to Child: _____
Address: _____

Person (s) authorized to pick up my child (Other than parents, guardians, or emergency contacts):	
Name: _____	Comment: _____
Name: _____	Comment: _____
Name: _____	Comment: _____
Name: _____	Comment: _____
Person (s) <b>NOT</b> allowed to pick up my child:	
Name: _____	Comment: _____
Name: _____	Comment: _____
Name: _____	Comment: _____

Name of school child attends: \_\_\_\_\_

Phone: \_\_\_\_\_

## Transportation & Field Trip Permission

I hereby request that my child, \_\_\_\_\_ be permitted to participate in field trips to the park, or any other activities that would involve taking the child outside of the daycare for his/her benefit in attendance at this facility.

I hereby expressly waive any claim for injury or damage to such child arising out of such field trip and expressly agree to hold **Noah's Ark Academy**, harmless.

Date: \_\_\_\_\_

***Persons signing contract are responsible for payment:***

Parent/Guardian (Mother) \_\_\_\_\_

Parent/Guardian (Father) \_\_\_\_\_

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## Media Authorization

\_\_\_\_\_ I authorize Noah's Ark Academy to photograph my child (ren).

I understand that such photographs may be used for promotional materials including, but not limited to, brochures, newsletters and Noah's Ark Academy website. No last name or specific identifying information will be included in any sort of material. If I do not want any photo on the website for any reason, I understand Noah's Ark Academy will gladly remove it as soon as possible.

\_\_\_\_\_ I **do not** authorize Noah's Ark Academy to photograph my child (ren).

Child (ren)'s Name

Date

\_\_\_\_\_

Parent/Guardian Signature

Date

\_\_\_\_\_