

# Little Sprouts Day Academy Registration Form

Please print clearly with blue or black ink.

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

Address: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Nickname: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Pager or Cellular Phone:  
(\_\_\_\_) \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

Work Hours: \_\_\_\_\_ Driver's License #  
\_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Home Phone:  
(\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Social Security #:  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_  
ext. \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Pager or Cellular Phone:  
(\_\_\_\_) \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

\_\_\_\_\_  
Work Hours: \_\_\_\_\_ Driver's License #  
\_\_\_\_\_

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

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

**Other Household Members:**

Names: \_\_\_\_\_ Ages: \_\_\_\_\_

Relationships  
\_\_\_\_\_  
\_\_\_\_\_

**Emergency Contacts**

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

**Primary Emergency Contact** (other than parents or guardian)

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

Work Phone \_\_\_\_\_

Relationship to Child:  
\_\_\_\_\_

Address:  
\_\_\_\_\_

**Secondary Emergency Contact** (other than parents or guardian)

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

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

Relationship to Child:  
\_\_\_\_\_

Address:

---

---

**Person (s) authorized to pick up my child:** (Besides parents, guardians, or emergency pick ups)

Name:

---

Comment

---

---

---

**Kid Code:** \_\_\_\_\_ (*Secret word between parent & child for identification and pick up*)

**Person (s) NOT authorized to pick up my child:** (Besides parents, guardians, or emergency pick ups)

Name:

---

Comment

---

---

---

---

## **Emergency Release**

### **Consent to Emergency First Aid & Transportation:**

I hereby give permission that my child, \_\_\_\_\_, may be given emergency treatment by a staff member at *Little Sprouts Day Academy*. I also give permission for my child to be transported by car, ambulance, or Aid car to an emergency center for treatment, and agree to hold \_\_\_\_\_ and its employees harmless.

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Consent to Medical Care and Treatment:**

In the event that I cannot be contacted immediately, medical or surgical treatment can be administered to my child in the case of an accident or emergency, as prescribed by a treating physician, and hold \_\_\_\_\_ and its employees harmless.

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency Information**

1. Child's Physician: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

2. Preferred Hospital: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

3. Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

4. Regular Medications:

\_\_\_\_\_

5. Blood Type:

\_\_\_\_\_

6. Medicine allergic to:

\_\_\_\_\_

7. Food Allergies:

\_\_\_\_\_

8. Any other Allergies:

\_\_\_\_\_

9. Any special health conditions:

\_\_\_\_\_

**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.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

***I understand this is a legally binding contract, and I have read it and understand it.***

**Scheduled Attendance:** Please tell us when your child will be attending our preschool.

<b><u>Day</u></b>	<b><u>Time In</u></b>	<b><u>Time Out</u></b>
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____