Enrollment Agreement

ya ya Day Care Center

Completion of this agreement is required for enrollment. This form will enable us to better understand your child and meet his/her needs. Much of the information requested is necessary to comply with state childcare licensing regulations.

Enrollme	Enrollment Information														
Child's Information															
Child's first name Ch				hild's middle name				Ī	Child's last name			Birth Date			
Age	Sex Child's primary language						Parent/guardian/sponsor pr			prim	rimary language				
Child's home address								City		(State		Z	ip	
Does your child attend school? School n □ Yes □ No				ol name			Grade				School phone				
School address				Di			Drop off time					Pick-up time			
Family Info	ormation														
List family men	nbers & pets y	our child	lives w	vith – include f	irst na	ames, relation	and ages o	of s	siblings						
Parent/guardian/sponsor Relatio						nship to child			Home phone		Cell phone				
Home address if different from above							City				State	Z		ip	
Home email					Work email						1	Work phone			
Employer Em			Empl	loyer address				C	City		te	Zip		Work hours	
Other parent/guardian/sponsor Ro				Relatio	Relationship to child				Home phone		,	Cell phone			
Home address if different from above						City					State		Z	ip	
Home email						Work email					Work phone				
Employer Employer				nployer address					City		te	Zip		Work hours	
Child Emergency Contact and Release Information (do not include parents/guardians/sponsors)															
Please notify the									n day. f is not familiar provide a p	hoto	ID at the tin	ne of nick up 1			
				Relationship to child			Home phone					Cell phone			
Home address					City			L		,	State		Zip		
Home email						Work email					Work Phone				
Employer Employer				nployer address					City	State		Zip		Work hours	
Person #2				Relationship to child			Home phone			Cell phone					
Home address						City					State		Zip		
Home email Wo					Wor	ork email					ork Phone				
Employer Empl				oloyer address					City		te	Zip		Work hours	
Person #3				Relationship to child					Home phone			Cell phone			
Home address							City				State		Zip	Zip	
Home email					Work email						Work Phone				
Employer En			Empl	Employer address					City		te	Zip		Work hours	