

2023-2024 Child Care Application for Enrollment / HBPC Preschool

STUDENT INFORMATION:

Date of Birth _____ Sex: M F

First Day of school _____

Hours of Care: _____

Days of the week MWF T/TH M-F

Full Name: _____

Child's Physical Address: _____

_____**FAMILY INFORMATION:**

Child lives with: Custody: Both _____ Mother _____ Father _____

Mother's Name: _____

Address: _____

Home phone: _____

Employer: _____

Address: _____

Work phone: _____

Cell Phone: _____ **Email:** _____

Father's Name: _____

Address: _____

Home phone: _____

Employer: _____

Address: _____

Work phone: _____

Cell Phone: _____ **Email:** _____**EMERGENCY CONTACTS:**

Child will be released only to the custodial parent or legal guardian and the persons listed
The following people will be contacted and are authorized to remove the child from the
facility in case of illness, accident or emergency if the parents or legal guardian can not be
reached. Please print

Name _____ Relation _____

Phone: _____ Address: _____

Name _____ Relation _____

Phone: _____ Address: _____

Name _____ Relation _____

Phone: _____ Address: _____

Name _____ Relation _____

Phone: _____ Address: _____

Name _____ Relation _____

Phone: _____ Address: _____

My child has a completed Emergency Care plan from the office: _____(yes or no)

*Special plan of action for devices and medical situations

Doctor Office/Name _____

Address: _____ Phone: _____

Dentist Office/Name: _____

Address: _____ Phone: _____

Hospital Preference: _____

Please list **allergies, special medical or dietary needs**, or other areas of concern:

*I give permission for HBPC Preschool to take and maintain photos of my child for security purposes, social media and crafts. I am aware that the school address is located on the Facebook page and geo location may be turned on.

*I give consent for my child to walk the property, go to the Sanctuary for Chapel and participate in activities outside the classroom.

*I give consent for HBPC Staff to take necessary steps on my child for medical care in the event of an emergency.

* Section 7.3 of the Child Care Facility Handbook requires that parents receive a copy of the Child Care Facility Brochure "Know your childcare facility" CF/PI 175-24

* Section 2.8 of the Child Care Facility Handbook, requires that parents are notified in writing of the disciplinary and expulsion policies used by the child care facility. Handbooks are available in hard copy and online.

My signature below indicates I have received the above information and this enrollment form is complete and accurate. I hereby grant permission for the staff of this facility to have access to my child's records. I understand that I must keep this information current.

I understand that children are enrolled in the class for his/her age on Sept. 1st.

I am legally authorized to enroll this child at HBPC Preschool.

I understand the enrollment fee is NON TRANSFERABLE AND NON REFUNDABLE.

Parent Name: _____ (print)

Parent Signature: _____ Date _____

Helpful Information about my child:

Siblings names and birthdates:

Primary Contact email address: _____

(please print clearly)

Office: Bill Date _____

Check # _____ Paid online _____