

CHILD ENROLLMENT FORMS

Child's Name _____ Male _____ Female _____ Birth date: _____

Child's Address _____ City _____ State _____ Zip _____

Parents/ Guardian Name _____ Contact Number _____

Parents/ Guardians Name _____ Contact Number _____

Marital Status _____ Special Custodial Conditions _____

TIME MEALS SERVED

Breakfast 8:30-9

Lunch 11:30-12:00

Afternoon Snack 3:00-3:30

What hours will your child usually be at the center? Arrive _____ Depart _____

**According to OCFS regulations your child can not be schedule for more than 9 ½ hours per day. Please notify Wee Care 24 hours in advance if your child will be at Daycare for different hours than what is stated.

Topical Ointment Permission: I give permission to Wee Care at Labor to apply the following topical ointments indicated below. I will provide all topical ointments in labeled containers.

Sunscreens _____ Diaper Ointment _____ Vaseline _____ Lotion _____

Antibiotic Ointment _____ Other _____

_____ I give permission full permission to take my child's picture for both Center and Public relations.

_____ I DO NOT give permission for my child's photograph to be taken. I will supply Wee Care with photos of my child when they are requested.

I understand that my child's picture will be taking when using the ProCare app for daily communication with families within the center.

I/ We have and understand the policies as stated in this Wee Care at Labor, Inc. Parent Handbook. I/ we understand that these policies may be changed at any time and agree to abide by these policies.

Parents /Guardian Signature: _____ Date _____

Parents/ Guardian e-mail _____

After 1 Year in Care

Is all of the above information still correct Yes _____ No _____

If no, what has change? _____

Signature of parent/ guardian _____ Date _____

After 2 Year in Care

Is all of the above information still correct Yes _____ No _____

If no, what has change? _____

Signature of parent/ guardian _____ Date _____

After 3 Year in Care

Is all of the above information still correct Yes _____ No _____

If no, what has change? _____

Signature of parent/ guardian _____ Date _____