

Start Date _____
Termination Date _____

**Mater Dei Child Care Center
Enrollment Form**

Child's Name _____ (Nickname) _____

Date of Birth _____ Sex _____

Address _____ City/Zip Code _____

E-Mail Address _____

Mother's Name _____ Occupation _____

Home Address _____ Home Phone _____

Employer's Name _____ Dept. _____ Work Phone _____

Father's Name _____ Occupation _____

Home Address _____ Home Phone _____

Employer's Name _____ Dept. _____ Work Phone _____

Hours of Care Needed – starting _____ AM to _____ PM.

Days of Week Care Needed - M Tu W Th F (Circle)

Child's Physician _____ Phone _____

Physician's Office Address _____ Allergies _____

Emergency Hospital Preference _____

Emergency Contacts other than Parents (must have two): (list alternate drivers on back)

Name _____ Home Phone _____

Home Address _____ Work Phone _____

Name _____ Home Phone _____

Home Address _____ Work Phone _____

(Signature of Parent/Guardian)

(Date)

Enrollment is open to any child regardless of race, religion, color, sex, national/ethnic (ancestry) origin, physical handicap.

Parent Involvement and Support

Write "yes" next to the intended event please. You will be contacted for help when the event(s) comes up. If you need to change your plan, it is totally understandable. This sign of support gives the staff an idea of where to begin with projects. All levels of involvement are appreciated.

Name of Child _____

1. Bring healthy treat for a classroom party.

Halloween _____ Christmas _____ Valentine's _____

2. Bring small toy/stickers/book for each child for a classroom party.

Halloween _____ Christmas _____ Valentine's _____

3. Bring small individually wrapped candy to stuff plastic Easter eggs to hunt on Holy Thursday. _____

4. Repair bicycles when needed. _____

5. Donate toys or books no longer using. _____

6. Rake leaves/bag them when needed in the fall. _____

7. Paint where needed on Annual Cleaning Day in mid-August. _____

8. Share personal talent or hobby such as playing instrument, gardening, sewing, photography, cooking etc. _____

9. Drive on a field trip when needed. _____

10. Other suggestions _____

I give my permission to Mater Dei Child Care Center to photograph my child,
_____ for purposes of the center.

Parent's signature: _____ Date : _____