

PRESCHOOL / STEAM LABORATORY ENROLLMENT FORM

Instructions: The parent / guardian shall complete this form and submit it to the center prior to the child's first day of attendance. Information on this form shall be kept current.

Child's Name: _____

Date Started at CTL: ____/____/____

Ethnic Origin: *(optional, please circle)* African American,
American Indian, Asian, Caucasian, Hispanic
Other: _____

Address: _____

Birthdate: ____/____/____

Male Female

Baptized? No Yes - Date: ____/____/____

Phone: _____

Grade Enrolling In: _____

Email: _____

Email: _____

Mother or Legal Guardian's Name	Home Address (If Different from Child's)	Home Phone	Employer	Work Phone
Father or Legal Guardian's Name	Home Address (If Different from Child's)	Home Phone	Employer	Work Phone

NOTE: If there are any court-ordered restrictions preventing a parent's contact with the child the court order must be attached to be valid.

Names of siblings or other family or non-family members living in child's home	Relationship to Child	Age

EMERGENCY CONTACTS In the event we cannot reach a parent:
 You must list at least 3 other persons from 3 different households who are authorized to pick up your child.
 Please check the appropriate box for Emergency Contact and/or Authorized Pick up for your child

Name	Address	Phone Number & Email address	Relationship	Emergency Contact	Authorized to Pick up my child

Please notify the office immediately if any of the above information changes.

Authorization	Yes	No
I hereby give my consent for emergency medical care or treatment to be used only if I cannot be reached immediately.		
I have had an opportunity to review the policies of this child care center and a summary of the Wisconsin Rules for Licensing Child Care Centers.		
I give permission for my child to participate in field trips and other activities during operating hours. <input type="checkbox"/> Transported <input type="checkbox"/> Walking		
I have been informed of the number of pets in the center and their degree of contact with the enrolled children. Note: If pets are added after a child is enrolled parents shall be notified in writing prior to the pet's addition to the center.		
I hereby grant leaders of Christ The Life permission to photograph/film the minor designated above in any manner or form for any lawful purpose associated with the Preschool/Child Care Program.		
I give permission for the following information to be listed in our school directory: Address, phone number, and email address.		

Parent/Guardian Signature: _____

Date: _____

For dual custody situations both parents' signatures are required.

Parent/Guardian Signature: _____

Date: _____