



Registration Form

Registration fee : N\$350 non refundable

Child's full name: _____

Date of Birth: Year _____ Day _____ Month _____

Address: _____

Preferred name to use: _____

Parent #1: _____ **Parent #2** _____

Home phone: _____ **Home phone:** _____

Cell Phone : _____ **Cell Phone:** _____

EMAIL: _____

Place of employment: _____ **Place of employment:** _____

Work Phone: _____ **Work Phone:** _____

Enrollment Date: Year _____ Day _____ Month _____
(start date)

Emergency contact persons if unable to reach parents:

Name: _____ **Home phone:** _____

Relationship: _____ **Work/cell phone:** _____

Name: _____ **Home phone:** _____

Relationship: _____ **Work/cell phone:** _____

Is there any person(s) other than yourself, your child may be released to **WITHOUT** written or verbal consent from you, the parent?

Name: _____ **Relationship:** _____

Name: _____ **Relationship:** _____

Medical Information

Doctor's name: _____

Address: _____ Telephone: _____

City: _____ Postal Code: _____

Health Card Number: _____ expiry date: _____

I hereby give consent to have my child examined and treated by a Physician if an emergency should arise, while in care, with Babies and Todd's Daycare.

Date

Signature of Parent/Guardian

Physical: 1. Does your child have any allergies? No _____

Yes _____ Explain _____

2. Any foods disliked? _____

3. Is your child used to daily outdoor play? _____

4. Is your child toilet trained? _____

5. Does your child need any help during toileting routines? _____

6. How does your child indicate the need to use the toilet? _____

Particulars of your Child

1. Does your child play with children, other than family members? Yes ___ No ___

2. Describe your child's interactions ie: shy, outgoing, rough play, talkative, etc. _____

3. Does your child have any particular fears? _____

4. How does your child handle frustration? _____

Day Care Membership Agreement

Babies and Todd's Daycare depends on the participation and co-operation of all its member families. **In order to understand your commitment, please read and understand the list below which each family signs and agrees to each year.**

1. **Registration** is complete when the Daycare receives a completed registration package with signatures, N\$350.00 registration fee (NON REFUNDABLE) and child can start school once monthly school fee is paid (NON REFUNDABLE)
2. **Fees**: 0-3 years is N\$1950 full day and N\$1250 half day. 4-6 years N\$1650 full day and N\$1000 half day. To always be paid before or on the 3rd of each month, as from the 4th an extra N\$150 is to be paid with school fee.
3. **Termination Notice**: If you decide to withdraw your child, **two weeks written notice is required prior to child's last day and no fees will be refunded.**
4. **Health**: I understand that my child may not attend Babies and Todd's on days that they are sick as it is not safe for my child and others.
6. **Centre Hours**: 7:00am is starting time, 13:30 for half day and 18:00 for full day. Teachers are encouraged to be at work earliest by 06:45am to accommodate parents.
7. **Late fee charges**: N\$50 for every 15 minute per child past the agreed pick up time will be required by parents and paid to respective teachers.
8. **Holidays**: Babies and Todd's only closes on public holidays as well as in December, date as to when is always communicated with Parents. If parents choose not to bring in their little ones due to GRN school holidays payment is still required to be made.
10. Families may be asked to withdraw from Babies and Todd's for nonpayment of fees, behaviour issues.

Membership Agreement

For a successful and happy relationship between children, parents, executives board members and teachers, we agree to abide by the agreement as outlined. I fully understand all the terms of this agreement,.

Date

Signature of Parent/Guardian