



Registration Form

Registration Date: _____
Registration Fee of \$25 (non-refundable)

Child's Name: _____ DOB: _____ Allergies: _____
Child's Name: _____ DOB: _____ Allergies: _____
Child's Name: _____ DOB: _____ Allergies: _____

Mother's First Name: _____ Last Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Cell _____
Home Phone: _____ Work: _____ Cell: _____ Provider: _____
Email: _____
Employed By: _____

Father's First Name: _____ Last Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Cell _____
Home Phone: _____ Work: _____ Cell: _____ Provider: _____
Email: _____
Employed By: _____

My child(ren) will attend the following days and times.

(Please circle) Mon. Tue. Wed. Thur. Fri. from _____ am to _____ pm

- I agree to pay in advance weekly, bi-weekly or monthly tuition.
- I am aware that I will be charged for child care if my child is sick or not in attendance.
- I am aware that I will be charged a fee for late tuition.
- I am aware that I will be charged a fee for late pick-ups.
- I am aware that a two week notice is required for withdrawals.
- I am aware that payment for the last two weeks of child care is due before care is given.
- I am aware that Scribbles & Giggles is within its rights to collect unpaid tuition through the district court.
- Late fees will be charged if children are picked up after the centers operating hours. The operating hours for Scribbles and Giggles Child Care Learning Center is 7:00am to 5:30pm Monday through Friday. Parents should arrive in time to get your child's belongings packed up and ready to leave the building before the center closing time. If you pick up your child after 5:31pm you will be charged a fee of \$5.00 per minute.

***Phone call to notify of late arrival will not exempt a late fee charge.
Late fees are due at pick up or at drop off time on the next day your child is to attend.

OVER----->

Emergency Contacts & Authorized Pick-Up Persons

Name: _____ Phone: _____
Relationship to the child: _____
Name: _____ Phone: _____
Relationship to the child: _____
Name: _____ Phone: _____
Relationship to the child: _____
Name: _____ Phone: _____
Relationship to the child: _____

PLEASE CHECK THE BOXES

Feeding & Diapering Policy:

Parents must provide formula/breast milk and baby food until your child eats our center meals. All diapers & wipes must be provided until your child is potty trained. If the center has to provide your child with these items, your account will be charged \$4.00 per meal, \$2.00 per snack and \$2.00 per diaper.

☐ **I understand this policy**

Topical Non-Prescription Medication Permission:

- ☐ S&G has my permission to apply Insect Repellant (provided by parent)
☐ S&G has my permission to apply Diaper Rash Cream (provided by parent)
☐ S&G has my permission to apply Antibiotic Ointment (provided by parent)
☐ S&G has my permission to apply Sunscreen (provided by S&G, additional \$5.00 fee yearly)
(S&G provides Coppertone Kids SPF 50 (You may provide your own if you choose))

Update yearly:

Initial/Date

Initial/Date

Initial/Date

Initial/Date

Photo Release:

S&G has my permission **YES or NO** to take photos of my child doing art projects, class activities, on field trips, etc. Some photos may be posted to our S&G Facebook page and on the monitor in the lobby.

Licensing Notebook:

Licensing Notebook-All child care centers must maintain a licensing notebook which includes all licensing inspections reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAP's developed on and after May 27, 2010 until the license is closed.

- ~This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans since May 28th, 2010.
- ~The notebook will be available to parents for review during regular business hours.
- ~Licensing inspection and special investigation reports from at least the last two years are available on the Bureau of Children and Adult Licensing website at www.michigan.gov/michildcare.

Immunization Record:

Upon enrollment you must provide a Certificate of Immunizations showing a minimum of one dose of each immunizing agent specified by the department of community health. If your child/children have not been immunized you must sign a waiver stating immunizations are not being administered due to religious, medical or other reasons. If we do not have the correct paper work your child/children will not be able to attend until it is turned in.

I agree that I have read and received the Parent Handbook and information packet containing additional policies and procedures. This institution is an equal opportunity provider.

Parent Signature: _____ Date: _____