## PLAY- n- GROW CHILDCARE CENTRE INC.

## **REGISTRATION FORM**

Child's First Name:		Child's Last Name:	
Name Child Uses (Nickname):			
Sex:		Birth date:	
Care Card Number:		Enrollment Date:	
Mother's First Name:		Mother's Last Name:	
Address:			
Home Phone Number:		Cellular Phone Number:	
Occupation:		Place of Employment:	
Hours of Employment:		Work Phone Number:	
Father's First Name:		Father's Last Name:	
Address:			
Home Phone Number:		Cellular Phone Number:	
Occupation:		Place of Employment:	
Hours of Employment:		Work Phone Number:	
Family Medical Number (if applications/Reactions/Treatments:	able):		
Family Doctor	Tel.No.	Address	
		s:	
		Last Name:	
Relationship to Child:			
Work Phone Number:		Cellular Phone Number:	
First Name:		Last Name:	
		Home Phone Number:	
Work Phone Number:			
PERSONS AUTHORIZED TO PICK-L	JP CHILD FROM DA	YCARE	
First Name:		Last Name:	
		Home Phone Number:	
		Cellular Phone Number:	
		Last Name:	

## PLAY- n- GROW CHILDCARE CENTRE INC.

## **REGISTRATION FORM**

Relationship to Child: Work Phone Number:	_ Home Phone Number: Cellular Phone Number:			
	_ Home Phone Number:			
	_ Cellular Phone Number:			
	Last Name:			
	_ Home Phone Number: Cellular Phone Number:			
First Name:	_ Last Name:			
	Home Phone Number:			
Work Phone Number:	_ Cellular Phone Number:			
Names of Siblings:				
Approximate time child will arrive at the Daycare daily:				
Approximate time child will be picked up from the Daycare daily:				
If there are any custody arrangements, please give details:				

Date:

Signature of parent or guardian