

# Peace Childcare Learning Center



For office use only:  
 Date received: \_\_\_\_\_  
 Registration fee paid: \_\_\_\_\_  
 Other paperwork received:  
 Health History Form  
 Immunization Record  
 Health Exam Form

## Contact Information - Enrollment Agreement

**Child's Full Name:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Physician/Medical Facility Phone Number: \_\_\_\_\_

Complete Address of medical facility: \_\_\_\_\_

Home Congregation / Affiliation: \_\_\_\_\_ Baptism Birthday: \_\_\_\_\_

Parent/Guardian #1

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Address: \_\_\_\_\_

Parent/Guardian #2

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Address: \_\_\_\_\_

**Emergency Contact and Release Information - If possible please notify the site if an Emergency Release Person will pick up your child on a given day. For the safety of your child, we will request all authorized pick up people with whom staff are not familiar to provide a Government issued photo ID at time of pick up.**

Emergency Contact #3

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency Contact #4

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Any additional Emergency Contacts or Authorized Pick up people indicate on back of form, include name, address, and phone number. →  
 The persons designated in this section will be contacted by Peace and are authorized to pick up your child if there is a medical or other emergency and you cannot be reached. In addition, release person must be 18 years of age or older. Site staff will release your child only to you or those persons you have listed above. Emergencies may prevent you from picking up your child; therefore, include those individuals whom you would authorize in such events. If you want a person who is not identified above you must notify site staff in advance, in writing. Your child will not be released without prior authorization.

My child has permission to participate in walking field trips

**Please indicate hours of childcare needed / Billing based on schedule / 3 day minimum for rotating schedule:**

Weekday	Monday	Tuesday	Wednesday	Thursday	Friday
Hours					

Enrollment Start Date:  
  
Month / Day / Year

\*Peace Childcare Learning Center is affiliated with Peace Lutheran Church and School. Children will be taught according to the vision of Peace Ministries: "Peace Lutheran will nurture and educate families in our community, beginning with children, so that they live abundant lives in Christ."