

Registration and Emergency Information

TO THE PARENT(S) OR GUARDIAN(S): This form allows our staff to conveniently access your child's information for enrollment purposes and in the event of an emergency.

START DATE: _____

CHILD'S NAME (LAST, FIRST): _____

DATE OF BIRTH: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PARENT(S) OR GUARDIAN(S) LEGALLY RESPONSIBLE FOR CHILD:

NAME (LAST, FIRST): _____

PHONE(S): _____ EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

While my child is attending The Tot Spot, I can be reached at the following:

LOCATION: _____ PHONE(S): _____

NAME (LAST, FIRST): _____

PHONE(S): _____ EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

While my child is attending The Tot Spot, I can be reached at the following:

LOCATION: _____ PHONE(S): _____

EMERGENCY CONTACT PERSON(S):

You are required to provide at least one person who may assume responsibility for your child in an emergency, if the parent/guardian cannot be reached immediately.

PERSON _____ RELATION _____ PHONE _____

PERSON _____ RELATION _____ PHONE _____

Child Information Form

CHILD'S NAME: _____

NICKNAME: _____

BIRTHDAY: _____ AGE: _____

LEARNING AND EXPOSURE:

HAS YOUR CHILD ATTENDED ANY OTHER PROGRAM(S) BEFORE? YES NO

HOW LONG? _____

MEDICAL HISTORY:

DOES YOUR CHILD HAVE ANY ALLERGIES? YES NO

WHAT TYPE(S)? _____

DOES YOUR CHILD HAVE ANY SPECIAL MEDICAL CONDITIONS? YES NO

EXPLAIN: _____

ANY CURRENT PRESCRIBED MEDICATION: _____

PHYSICIAN: _____ PHONE: _____

TOILETING INFORMATION:

DOES YOUR CHILD USE DIAPERS? YES NO

IF YES, PLEASE INDICATE SIZE _____, APPROX. #/DAY _____

IS YOUR CHILD POTTY TRAINING OR TRAINED? YES NO

IF YES, HOW LONG? _____

DOES SHE/HE USE BATHROOM INDEPENDENTLY? YES NO

MISCELLANEOUS:

IS YOUR CHILD WALKING ON HER/HIS OWN? YES NO

DOES YOUR CHILD NEED HELP DRESSING OR UNDRRESSING? YES NO

DOES YOUR CHILD HAVE ANY FEARS? YES NO

EXPLAIN: _____

PARENT SIGNATURE: _____

Contractual Agreement

HOURS AND FEES

The Tot Spot programs will be scheduled from 7:30 a.m. - 5:30 p.m. The tuition will be \$195 per week for 5 days, Monday - Friday. We do not have make-up days or refunds for illness or absences.

DAMAGES

Both the parent or guardian and The Tot Spot will make an effort to educate children on how to use materials carefully to avoid damaging property that belongs to others. However, in the case of damage (over \$10.00 in value); the parent agrees to cover the cost of replacement or repair.

THE PARENT OR GUARDIAN AGREES TO

1. Have all forms completed, current, and on file with The Tot Spot before your child starts the program. Ensure enrollment fee/deposits are made prior to the start of the program;
2. Call by **8:00 a.m.** if your child will not be coming;
3. Make arrangements for bringing/picking up your child when you are going to be early or late;
4. Call or send a note if someone else is to pick up your child and also send proper identification with that person;
5. Give 30-day notice if you plan to stop bringing your child to The Tot Spot. I understand tuition is still due should I not fulfill my 30-day notice to The Tot Spot;
6. Notify staff of any contagious illness so we may inform other parents;
7. Have your child dressed and ready to participate upon arrival; and
8. Provide complete change of clothing, including undergarments, which are appropriate for the weather and updated through out the seasons, to be left at the center.

OPERATING POLICIES

1. The Tot Spot does not provide snacks;
2. Ages **12 months to 36 months** will be accepted for programs;
3. Late payment fee is \$20 and a returned check fee will be \$35;
4. Non-refundable deposits are due at enrollment. First time enrollment fee is \$50.00;
5. If your child is sick during the day (i.e., fever, vomiting, diarrhea, earaches) you will be called and he/she will be sent home;
6. Only prescription medication may be given to children during the program or medicine that is accompanied by a doctor's note. Staff may not administer aspirin, antihistamines, vitamins, etc. unless the parent brings a doctor's note; and
7. Tuition is still due for holidays and vacation weeks (yours and/or ours), payable on the Friday prior to vacation.

PARENT'S/GUARDIAN'S NAME

PARENT'S/GUARDIAN'S SIGNATURE

THE TOT SPOT STAFF

DATE



Student Withdrawal Form

I hereby give 30-day notice that my child _____
(FULL NAME)

will be withdrawing from The Tot Spot on _____ (Day/Month/Year).

This fulfills my responsibility to give a 30-day notice to the program. I understand tuition is still due should I not fulfill my 30-day notice to The Tot Spot.

PARENT SIGNATURE

DATE

Received by:

THE TOT SPOT STAFF

DATE



General Consent Form

I give permission to The Tot Spot for the following for my child:

- Child's information (phone number, address, parent(s) name, parent(s) email) to be included in a class directory to be distributed to families in my child's classroom.
- Photograph, video or record my child for the purpose of demonstrating his/her lesson development, individual class or school photographs, outings and/or other special occasions. I give the school the right to exhibit, distribute and use or otherwise dispose of said material. This includes postings to The Tot Spot's website and/or Facebook page. *Note: Children will NOT be identified in the photographs/videos, nor will names be used in postings by any staff member for any reason.*
- Go on staff accompanied walks in the neighborhood.
- Staff member(s) to apply community sunscreen and/or bug repellent before outdoor recess.

I understand that permission for the above is in effect until withdrawn in writing or until my child no longer attends the The Tot Spot.

Child's name: _____

Parent/Guardian's name: _____

Parent/Guardian's signature: _____

Date: _____