



## Day Care Application

### Child's Information:

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

Date of Birth: \_\_\_\_\_ Gender: Male/ Female

Preferred Nickname (if any): \_\_\_\_\_

Child's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

### Parent/Guardian Information:

#### Parent/Guardian 1:

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Home Address (if different from child's): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

#### Parent/Guardian 2 (if applicable):

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Home Address (if different from child's): \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Emergency Contacts:

#### Emergency Contact 1:

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

#### Emergency Contact 2:

Full Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_  
Does your child have any allergies (food, medication, environmental, etc.)? If yes, please provide details: \_\_\_\_\_

Desired Start Date:  
Date (MM/DD/YYYY): \_\_\_\_\_

Duration of Care:

- Full-time (Monday to Friday)  
 Part-time (Please specify days and hours):  
\_\_\_\_\_

Please select the desired enrollment commitment:

- 6 months     1 year     2 years     Program completion/5 years

Additional Information:

Is your child currently enrolled in another daycare or preschool program?  
Yes / No (If yes, please provide details) \_\_\_\_\_  
Does your child have any special needs or medical conditions we should be aware of?  
Yes / No (If yes, please provide details) \_\_\_\_\_  
How did you hear about our daycare? \_\_\_\_\_

Additional Comments or Requests:

Agreement and Signature:

I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that submitting this application does not guarantee enrollment in **Happy Day Learn & Play Care**.

Parent/Guardian 1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian 2 Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_