

Punkin Patch DayCare Center

Admission Information

General Information

Child's Full Name:		Child's Date of Birth:	
Child's Home Address:			
Date of Admission:		Date of Withdrawal:	
Name of Parent or Guardian Completing Form:		Address of Parent or Guardian (if different from the child's):	
Parent/Guardian DL #:	Parent/Guardian DOB:	Parent/Guardian Email:	

List telephone numbers below where parent/guardian may be reached while child is in care.

Parent/Guardian Cell #:	
Parent/Guardian Work #:	

Give the name, address and phone # of the responsible individual to call in case of an emergency if parent/guardian cannot be reached:

Name:	Address:	Phone #:	Relationship:

Give the name and phone # of any individual authorized to pick up your child(ren). Children will only be released to a parent or guardian or to a person designated by the parent/guardian after verification of id.

Name & Phone #:	Name & Phone #:

Transportation & Activities

Check all that apply:

Transportation: I give consent for my child to be transported and supervised by the operation's employees.

for emergency care
 on field trips
 to and from school

Water Activities: I give consent for my child to participate in the following water activities.

water table play
 sprinkler play
 pools
 aquatic playgrounds

I give consent for my child's photo to be used on the center's social media site's.

School Age Children

My child attends the following school:

School Address:	School Phone Number:

Child's required immunizations and vision & hearing screening are current and on file at their school.

Authorization for Emergency Medical Attention

Name of Physician	Address:	Phone Number:
Name of Emergency Care Facility:	Address:	Phone Number:

By signing below, I give consent for the facility to secure any and all necessary emergency medical care for my child.

Signature-Parent or Legal Guardian:

Meals

I understand that the following meals will be served to my child while in care:

Breakfast Lunch PM Snack

Days & Times in Care (My Child is normally in care on the following days and times):

Day of the Week	A.M.	P.M.
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Child's Additional Information Section

List any special needs that your child may have, such as environmental allergies, food intolerances, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregivers should be aware of:

Child day care operations are public accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800)514-0301 (Voice) or (800)514-0383 (TTY)

Does your child have diagnosed food allergies? Yes No

Plan submitted on:

Admission Requirement

If your child does not attend pre-kindergarten or school away from the child care operation, one of the following must be presented when your child is admitted to the child care operation or within one week of admission.

Please check only one option:

A signed and dated copy of a health care professional's statement is attached.

Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of. I have attached a signed and dated affidavit stating this.

My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and submit it to the child care operation.

Requirements for Exclusion

I have attached a signed and dated affidavit stating that I decline immunizations for reason of conscience, including religious belief, on the form described by Section 161.0041 Health and Safety Code submitted no later than the 90th day after the affidavit is notarized

I have attached a signed and dated affidavit stating that the vision or hearing screening conflicts with the tenets or practices of a church or religious denomination that I am an adherent or member of.

Gang Free Zone

Under the Texas Penal Code, any area within 1,000 feet of a child care center is a gang free zone, where criminal offenses related to organized criminal activity are subject to harsher penalties.

Privacy Statement

DFPS values your privacy. For more information, read our Privacy and Security Policy online at <http://www.dfps.state.tx.us/policies/privacy.asp>

Child's Parent or Legal Guardian:

Date Signed:

Signature:

Date: