

**CHILD REGISTRATION FORM**  
**MISS ALYSON'S DAYCARE - HBC**  
7117 Ladysmith Rd. Ruther Glen, VA 22546

Child's Name	Nickname	Date of Birth	Sex
Address		Home Phone	
Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations Needed			
Previous Child Day Care Programs and Schools Attended			
Name of School/Programs Child Attends in Addition to this Center			Grade

**PARENT(S)/GUARDIAN(S)**

Name	Relation to Child	Employer
Home Address		Phone <input type="checkbox"/> Home <input type="checkbox"/> Cell
Business Address		Business Phone
Email	Person(s) or Agency Having Legal Custody of the Child	

Name	Relation to Child	Employer
Home Address		Phone <input type="checkbox"/> Home <input type="checkbox"/> Cell
Business Address		Business Phone
Email	Person(s) or Agency Having Legal Custody of the Child	

**HEALTH & EMERGENCY INFORMATION**

Allergies of Intolerance to Food, Medication, etc., and Action to Take in an Emergency		
Child's Physician		Phone
Primary Emergency Contact	Relation to Child	Authorized to Pickup Child?
Home Address		Phone
Secondary Emergency Contact	Relation to Child	Authorized to Pickup Child?
Home Address		Phone
Person(s) Authorized to Pick Up Child		
Person(s) <u>NOT</u> Authorized to Pick Up Child		

Appropriate paperwork shall be attached if a parent is not allowed to pick up the child. NOTE: Section 22.1-4.3 of the Code of Virginia states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.

(over)

### AGREEMENTS

The child day center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill. The parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.

The parent(s)/guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately.\*\*

The parent(s)/guardian(s) agree to inform the center within 24 hours or the next business day after the child of any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.

### SIGNATURES

<hr/> <i>Parent(s) or Guardian(s)</i>	<hr/> <i>Date</i>
<hr/> <i>Administrator of Center</i>	<hr/> <i>Date</i>

Date Child Entered Care: \_\_\_\_\_

Date Left Care: \_\_\_\_\_

\*\*If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection

<b>ANNUAL REVIEW</b>	
The Child's file has been reviewed in its entirety and any necessary changes have been made.	
<hr/> <i>Parent(s) or Guardian(s)</i>	<hr/> <i>Date</i>
<hr/> <i>Parent(s) or Guardian(s)</i>	<hr/> <i>Date</i>
<hr/> <i>Parent(s) or Guardian(s)</i>	<hr/> <i>Date</i>

### OFFICE USE ONLY -- IDENTITY VERIFICATION

Place of Birth	Birth Date	Birth Certificate Number	Date Issued
Other Form of Proof		Date Doc Viewed	Person Viewing Documentation

<input type="checkbox"/>	The center assumes responsibility for the child directly from or transfers directly to the school. Name of the Virginia public school where child is enrolled:
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Date of Notification to Local Law-Enforcement Agency (when required proof of identity is not provided): \_\_\_\_\_

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth, passport, copy of the placement agreement or other proof of the child's identity from a child placing agency, record from a public school in Virginia, certification by a principal or designee of a public school in the US that a certified copy of the child's identification was previously Section 63.2-1809 of the Code of Virginia states that the center must take all reasonable steps to ensure that any copies of the proof of identity are destroyed or otherwise made unreadable or indecipherable by any means.