



## Little Paddington Day Care



### Child Details:

Name \_\_\_\_\_ Surname \_\_\_\_\_

Gender \_\_\_\_\_ ID \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Family Doctor \_\_\_\_\_ Doctors telephone \_\_\_\_\_

For Emergencies only: Medication for Fever Yes ☐ No ☐

Does your child have any Allergies? \_\_\_\_\_

### Parents Information:

Mother/Guardian's Name \_\_\_\_\_ ID \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Address \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_ WorkPhone \_\_\_\_\_

Father/Guardian's Name \_\_\_\_\_ ID \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Address \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_ Work Phone \_\_\_\_\_

Child First Day at School \_\_\_\_\_

Full Day ☐ Half Day ☐ After School Care ☐

Signature of parent/guardian..... Date.....

By Signing, You Agree to the Terms & Conditions of Little Paddingtons Day Care

### For Office Use Only:

Enrolment Fee: \_\_\_\_\_ Fees Paid: \_\_\_\_\_

Start Date: \_\_\_\_\_