One Step Learning Opportunities Centre (OSL)

Daycare Registration/Enrollment Form Date			ccepted at OSL	Date child left care	
Child's name Lastname First r	name Middle n	name(s)		Birthdate yyyy/mm/dd	
Child's Home address:					
City		Digital GPS:	:		
Child's parent/guardian name	home phone #	cell phone#	Work	phone #	
	() -	()	-) -	
Street address		City	Di	gital GPS:	
Work Place /School		City	Di	gital GPS:	
Child's parent/guardian name	home phone #	cell phone#	Work	Phone	
	() -	()	- # () -	
Street address		City	Di	gital GPS:	
Work Place /School		City	Di	gital GPS:	
Care Required Days:					
Hours:					
Other than you, who else has permission to pick up your child?					
Name	Address			phone number	
Name:			Home: Cell:		
Relationship:			Alternative:		
Name:			Home:		
Relationship:			Cell: Alternative:		
In case of an emergency, I give permissio released to any of them.		ng individuals t	o be contacted	l and my child may be	
Parent/Guardian signature:					
Name	Address		Teler	phone number	
Name:			Home: (-	
Relationship:			Cell: ()	-	
			Alternative: () -	

Who does not have permiss	sion to pick up your child	? If applicable (A copy of	supporting court document must be		
Name	grow to provide the your times	Reason			
Child's health					
Child's health care provider			Telephone number () -		
Street address		City	Digital GPS:		
Special health problems?		Allergies, including drug reactions			
Yes or no? If yes, specify.		Yes or no? If yes, specify.			
D1 1'4' 0		Other inserted inferre			
Regular medications? Yes or no? If yes, specify.		Other important information Yes or no? If yes, specify.			
Immunizations: Started / Declined (please check 1)		Medical History:			
Personal Information:					
Parents Method of discipline	2.				
Favorite Activity:					
Special Diet:					
Cultural and Religious consideration:					
Email id-					
Technology policy agreement (Please Indicate)					
Allow my child to listen to	music /radio in the center	Yes/No			
Use my child's art work for display		Yes/No			
 Allow my child to watch TV/VIDEO in the center 		Yes/No			
Photograph of my child in center's display Yes/No					
_	on my behalf for my child's lia and daycare promotion ma	terials Yes/No			
Allow my child's photo or name on daycare's Website or Daycare's social media account Yes/No					
Parent/guardian signature	Date	Parent/guardian sign	ature Date		