

Name Of Child:	Birthdate:		
	City:		
State: Zip Code:			
Parent/Guardian 1:	Cellphone: ()		
Street Address: (If different from chi	nild's)		
City:St	tate: Zip Code:		
Relationship to child:			
Place of Employment:	Work Phone: ()		
Employment (physical address)			
City:St	tate:Zip Code:		
Best Email:			
Parent/Guardian 2:	Cellphone: ()		
Street Address: (If different from chi	ild's)		
City:St	tate: Zip Code:		
Relationship to child:	·		
	Work Phone: ()		
Employment (physical address)			
City:St			
Best Email:			
Who to contact first, and best way to	to reach you:		
EMERGENCY CONTACTS (to whom of	child may be released if guardian(s) are unavailable)		
Name #1:	Relationship		
Address:			
Phone Numbers (cell, work, home)_			
Name #2:	Relationship		
	Office Use Only:		
Admission Date:	Discharge Date:		

MaineLy Childcare management must be notified (by email or in person) by the parent when regular transportation or pick-up methods will vary.

Please list the individuals that we are able to verbally communicate with about your child(ren). For example: If Grandparents call or pick up, are we able to share information abou your child's day to them? Are they able to sign accident reports?
Name, address and telephone number of family physician:
Name, address and telephone number of family dentist:
MEDICAL INFORMATION
This authorization includes my consent for the above-named child to receive treatment by a physician in any hospital emergency department.
I, (name)hereby give my consent, in the event of medical emergency when I cannot be contacted, for MaineLy Childcare staff to obtain whatever treatment may be deemed necessary for my son/daughter (Child's name)(DOB)
Preferred Hospital:
Known Allergies and reactions. What to do if a reaction occurs:
Does your child have an Epi Pen? If the answer is yes, please indicate what it is for:
Any Known MedicalConditions:

Please list here (or on an addifactors concerning the child's occurrences or any other infogroup care:	<u> </u>	inusual events and
Please fill this out to the best ask that you let us know if you than previously posted. Pleas	ur child will be dropped off/pio	ked up at a different time
Day of the week	Approximate Drop off time	Approximate Pick up time
Tuesday		
Wednesday		
Thursday		
Friday		
Financial Agreement I understand that tuition is due to from the account I have on file.	·	
I understand that my child's wee tuition is still due during school of		
I understand there will be a \$10 tuition is late, unless I make arra Childcare has the right to termin	angements with MaineLy Childca	re. I also understand MaineLy

Registration Fees

There is a one time registration fee of \$150 due prior to your child starting at MaineLy Childcare. Additionally, there is a re-enrollment fee of \$50 due August 1st before the new school starts.

Late pick up fees

Parent/Guardian Signature

Our center closes promptly at 5:00PM. Please be respectful of our closing time. If you would like to be able to speak to someone about your child's day, please arrive a few minutes before 5pm. We have many teachers who need to pick up their own children in the evenings. Late fees are the following:

5:00 PM - 5:05 PM: \$1.00 per minute
5:06 PM - 5:15 PM: \$3.00 per minute
5:15 PM and on: \$10.00 per minute.

Please note: Late pickup fees are to discourage lateness and to encourage respect for our teachers' time with their own families. Late fees must be paid within 5 business days, or we reserve the right to terminate care until the fee is paid.

reserve the right to terminate care until the fee is paid.	, addinioso dayo, or mo
By signing below, you are indicating that you understand MaineLy Chi late fee policy.	ildcare's tuition policy and
Parent/Guardian Signature	Date
Walk Permission Sometimes we need a break from the playground and would rather go for nature items, or simply explore our surroundings. By signing this yearnission to take your child off site for a short walk. You should know center there will always be at least two staff members present. If you reparticipate on walks that is okay too. I give my child permission to take walks off site I would NOT like my child to participate on walks off site	ou are granting us your v that if we do leave the would rather your child not
Parent/Guardian Signature	Date
Sunscreen Permission MaineLy Childcare has permission to use the following sunscreen on Brand of Sunscreen Provided and or brands that are okay to use:	my child(red):

Date

Photo Permission		
I, (Print name), parent or g	uardian of (Child's N	lame)
grant permission to Mair photographs and/or digital images of my child for use in news rematerials as follows:	•	
Printed Publications (newsletter, pamphlets, portfolios etc)	Yes	s No
Electronic Publications (newsletters, our website etc)	Yes	s No
Social Media (Facebook)	Yes	s No
Parent App (Forefront or background of photos that may be sha other families in the program)	ared with Yes	s No
Parent App (Photos of your child can be shared with you through	gh the app) Yes	s No
I agree that my child's name and identity may be revealed in de or commentary in connection with image(s)	escriptive text Yes	s No
Parent/Guardian Signature	Da	te
I have read and understand MaineLy Childcare's YIKES plan and emergency that requires relocating, MaineLy childcare staff may they see fit.	•	
Signature	Da	te
Parent Handbook I have read and understand the parent handbook, and if I have do ask the Directors to get clarification. In addition I understand the Handbook at all times on the MaineLy Childcare website: www.n	at I can access the P nainelychildcare.com	arent
Parent/Guardian Signature	Da	te