Marent email address.

DIVISION OF LICENSING PROGRAMS DEPARTMENT OF SOCIAL SERVICES CHILD REGISTRATION FORM (Model)

Child	Nicki	name	Date of Birth		Sex		
Address		1100		Home Pho	one		
Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations Needed							
Previous Child Day Care Programs and School	s Attend	ed					
If Child Attends this Center and Another School/Program, Give Name of School/Program					Grade		
PARENT(S)/GUARDIAN(S)							
Father		Place Employed		Business Phone			
Home Address				Home	Phone		
Mother	Place Employed			Business Phone			
Home Address					Home Phone		
Person(s) or Agency Having Legal Custody of	Child						
Home Address					Home Phone		
Business Address					Business Phone		
		NCY INFORMATIO					
Allergies or Intolerance to Food, Medication, e	etc., and	Action to Take in an E	mergency				
Child's Physician				Phone	141		
Two People To Contact if Parent(s) Cannot Be Reached	Address			Phone			
1.	1.			1			
2.	2.			2.			
Person(s) Authorized To Pick Up Child							
Person(s) NOT Authorized To Pick Up Child*	•						

- Appropriate paperwork such as custody papers 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.

Photo Release Form

As the parent of a child/children at Willow Tree Academy, LLC, I agree to the following:

- I understand that my child(ren) whose name(s) are listed below may be photographed at Willow Tree Academy, LLC during normal daycare hours, field
 trips, or activities.
 - I understand that these photographs may be used in school newsletters or mounted on the Willow Tree Academy, LLC website and/or facebook page.
 - I give permission for my child(ren)'s photographs to be mounted on Willow Tree Academy's website, facebook page, or newsletters. (When names are added, only first names will be used.)

The following are the names of my children attending Willow Tree Academy, LLC:

- () Yes, I confirm that I have read and understood the above, and agree to have my child (ren)'s photos mounted on the Willow Tree Academy, LLC website, facebook page, or newsletters.
- () No, I do not wish to have my child (ren)'s photographs published

Name (please print) _______
Signature:

Date:_____

If for any reason it is decided upon the parent that your child will no longer be enrolled at Willow Tree Academy. We ask that a 2 week written notice be given to the director. At that point it's also required that tuition is paid for that corresponding 2 weeks period before the child leaves.

	(A)		
Claushing.			
Signature		· ·	

Date _____