



Trinity School of Early Learning
 2217 Columbia Pike
 Arlington, VA 22203

Office Use:

Registration Check # _____
 Date: _____
 Amount: _____
 Starting Date: _____

Child Information

Child	Nickname	Date of Birth	Sex
Address		Home Phone/ Area Code	
Chronic Physical Problems/Pertinent Developmental Information / Special Accommodations Needed			
Previous Child Day Care Programs and Schools Attended			
If Child Attends this Center and Another School/Program, Give Name of School/Program			Grade

Parent(s)/Guardian(S) Information

Mother	Place of Employment	Business Phone/ Area Code
Home Address		Home Phone /Area Code
City, State , Zip		Cell Number
E-mail	Language Spoken at Home	
Father	Place of Employment	Business Phone/ Area Code
Home Address		Home Phone Area Code
City, State, Zip		Cell Number
E-mail	Language Spoken at Home	
Step Parent	Relationship	Business Phone
Home Address		Home Phone
City, State, Zip		Cell Number
E-mail	Language Spoken at Home	
Person(s) or Agency Having Legal Custody of Child		
Home Address	Home Phone	Cell Number
Business Address	Business Phone	

Emergency Information

Allergies or Intolerance to Food, Medication, etc., and Action to Take in an Emergency <i>(Documented Allergies must have action plan from Doctor)</i> Please write N/A if not applicable.		
Child's Physician	Area Code/Phone	
Two people to Contact if Parent(s) Cannot Be Reached <i>(Contact must speak English)</i>		
Name	Address	Area Code/Phone
Name	Address	Area Code/Phone
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.

Agreements

1. The child day center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
2. The parent(s)/guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parents(s)/guardian(s) cannot be located immediately. **
3. The parent(s)/guardian(s) agree to inform the center within 24 hours or the next business day after his/her child or 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.

Signature

Parent(s) or Guardian(s)

Date

Administrator of Center

Date

**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.

Date Child Entered Care: _____ Date Child Left Care: _____

1. Is your child potty trained? _____ If not, do you use diapers or pull-ups? _____
 If you are potty training, what approach are you trying from home? _____

2. What developmental characteristics is your child accomplished working on, or having trouble with?

Characteristic	Accomplished	Working ON	Trouble
Gross Motor			
Walking			
Running			
Jumping			
Language			
0-50 Words			
50-100 Words			
Partial Sentences			
Full Sentences			
Fine Motor Skills			
Pinching			
Can hold Crayon/Pencil			
scribbles			
Drawings Recognizable			
Draws Pictures			
Color Pictures			
Uses Multiple Colors			
Social/Emotional			
Shares well			
Plays well with other children			
Follow single directions (i. e. Put the toy in the box)			
Follows Multiple directions (i.e. Put the toy in the box and wash your hands)			

3. What discipline methods do you use at home? _____
4. Does your child sit in time out if you put them there? _____
5. Does your child have trouble going down for a nap? _____
6. Does your child eat well or are they picky eaters? _____
7. Does your child cry when you leave them with others? _____
8. Has your child been in day care before? In a center setting? Family home day care? Relative?

OFFICE USE ONLY IDENTITY VERIFICATION

If proof of identity is required, please fill out the following

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

Date of Notification of Local Law-Enforcement Agency (when required proof of identity is not provided)

Date

Proof of the child's identity and age may include certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child's identity from a placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal or his designee of a public school in the U.S. that a certified copy of the child's birth record was previously presented or copy of the entrustment agreement conferring temporary legal custody of a child to an independent foster parent. Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia and the center assumes responsibility for the child directly from the school (i.e., after school program) or center transfers responsibility of the child directly to the school (i.e., before school program). While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.

Section 63.2-1809 of the code of Virginia state that the proof of identity, if reproduced or retained by the child day program or both, shall be destroyed upon the conclusion of the requisite period of retention. The procedures for the disposal, physical destruction or other disposition of the proof of identity containing social security numbers shall include all reasonable steps to make them unreadable or indecipherable by any means.