



# CUMC PRESCHOOL AND CHILD CARE CENTER

1711 Kirby Road, McLean, Virginia 22101

703-854-1690 / 703-854-1693 (fax)

ChesterbrookPre@aol.com / www.ChesterbrookPreschool.org

# ENROLLMENT APPLICATION

2009-2010

Return this form with your registration fee for \$125.00

Child	Nickname	Date of Birth	Sex
Address			Home Phone
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
CPAC CLASS(es) REQUESTED:			

### PARENT(S)/GUARDIAN(S)

Father	Place Employed	Business Phone
Home Address		Home Phone Email
Mother	Place Employed	Business Phone
Home Address		Home Phone Email
Person(s) or Agency Having Legal Custody of Child:		
Home Address		Home Phone and Email
Business Address		Business Phone

### EMERGENCY INFORMATION

Allergies or Intolerance to Food, Medication, etc., and Action to Take in an Emergency:		
Child's Physician		Phone
Two People to Contact if Parent(s) Cannot Be Reached:		
Name	Address	Phone
Name	Address	Phone
Person(s) Authorized to Pick Up Child	Name	Name
Person(s) NOT Authorized to Pick Up Child	Name	Name

- Appropriate paperwork such as custody papers shall be attached if apparent is now 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 daycenter to obtain immediate medical care if any emergency occurs when the The parent(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.

\_\_\_\_\_  
Parent(s)/Guardian(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator of Center

\_\_\_\_\_  
Date

Date Child Entered Care: \_\_\_\_\_ Date Left Care: \_\_\_\_\_

\*\*If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s)/guardian(s)

For Office Use Only:

**OFFICE USE ONLY  
IDENTITY VERIFICATION**

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

If proof of identity is required and a copy is not kept, please fill out the following:

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 a 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 child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal of his designee of 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 the 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 states 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 destroy such documents by (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means.

**032-05-252/11 (06/05)**