



# BROADMOOR PRESCHOOL

## MOM'S DAY OUT REGISTRATION FORM BABIES 3 MONTHS (BY 09/01/2018) - 2 YEARS OLD

### CHILD'S INFORMATION

Child's Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Child's Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  M  F Is the Child Potty Trained?  Yes  No

Child's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ - \_\_\_\_\_

Sibling(s): \_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_

Previous Day Care:  No  Yes (Where?) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

List Any Physical or Mental Limitations: \_\_\_\_\_

List Any Allergies: \_\_\_\_\_

**WILL ATTEND**  Tuesday Only  Thursday Only  Tuesday & Thursday

### PARENT INFORMATION

Mother's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Business: \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Business: \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Marital Status:  Single  Married  Separated  Divorced  Widowed

Who Does the Child Live With? \_\_\_\_\_

### THE FOLLOWING INDIVIDUAL(S) ARE PERMITTED TO PICKUP MY CHILD

Name	Relationship to Child	Phone
_____	_____	( ) _____
_____	_____	( ) _____
_____	_____	( ) _____

### EMERGENCY CONTACT (LOCAL ONLY)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home #: ( ) \_\_\_\_\_ Work #: ( ) \_\_\_\_\_ Cell #: ( ) \_\_\_\_\_

### MEDICAL EMERGENCY

Dr. \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

## AGREEMENT

Please read carefully. Your signature indicates that you understand and will abide by the following policies. In case of emergency or illness of my child, I authorize Broadmoor Baptist Church's Mom's Day Out to secure the physician named above - or another competent physician - if I am not able to be located immediately.

In circumstances where the Program Director and Preschool Minister determine, in their discretion, that we are unable to provide the appropriate level or manner of care for your child, Broadmoor will work with you to make reasonable adjustments to the environment in an effort to accommodate your child's unique needs. If these adjustments do not enable our staff members to provide appropriate levels of care, either to your child or to other children, Broadmoor will attempt to assist in providing a list of potential childcare options and provide a reasonable time for you to transition your child to another provider. At all times, our desire is to provide a safe, loving, Christ honoring level of care for every child and by extension, for every family, whom we serve.

I also accept the following policies and regulations of Broadmoor Baptist Church's Mom's Day Out and release it from any liability for injury or illnesses resulting from conditions or circumstances beyond its control.

1. There is a non-refundable \$75 registration fee to reserve a place for your child.
2. Tuition is due by the first Tuesday of each month.
3. Please make checks payable to Broadmoor Baptist Church.
4. There will not be deductions for days missed, holidays, or severe weather days.
5. Tuition is as follows:  
One Day/Week (Babies & Toddlers Only).....\$87.50/Month  
Two Days/Week ..... \$175.00/Month  
Supply Fee..... \$35.00/Semester
6. Late charges will be applied if your child is picked up after 2PM. There will be a late charge of \$5 if your child is not picked up by 2:10PM, and a charge of \$1 per minute thereafter.
7. A two-week, written notice is required before leaving the Mom's Day Out Program.

I have read and understood the above information and the information provided in the handbook. I agree to abide by Broadmoor Baptist Church's Mom's Day Out policies and guidelines. I also agree that Broadmoor Baptist Church's Mom's Day Out shall not be held responsible for any accident or misfortune which might occur and agree to indemnify and hold harmless Broadmoor Baptist Church's Mom's Day Out for any and all actions or inactions by Broadmoor Baptist Church's Mom's Day Out, its agents, or employees.

Signature: X \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## PERMISSION FOR PHOTO/VIDEO USE

Please Check One:  I agree...  I do not agree... to give permission for Broadmoor Mom's Day Out to take pictures and/or video of my child, \_\_\_\_\_, for display or advertising purposes, including local newspapers, bulletin boards or Broadmoor Baptist Church publications.

Signature: X \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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### FOR OFFICE USE ONLY

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Comments: \_\_\_\_\_

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_