



# Baby, Toddler and Preschool Land

## Registration Form

10400 Fairfax Village Drive  
 Fairfax, VA 22030  
 (703) 279-7188

Child's Name	Nickname	Sex	Date of Birth
Address			Home Phone
If Child Attends this Center and Another School/ Program, Give Name of School/Program			
Chronic Physical Problems/ pertinent Development			
List Any and All Previous Child Care Centers and Schools Child Has Attended			

### Parents / Guardian

Father	Home Phone	Cell Phone
Home Address	Place Employed	Email Address
Business Address		Business Phone Number
Mother	Home Phone	Cell Phone
Home Address	Place Employed	Email Address
Business Address		Business Phone
Person(s) or Agency Having Legal Custody		
Home Address		Home Phone
Business Address		Business Phone

### Emergency Information

Allergies or intolerance to food, medication, etc. and Action To Be Taken in an Emergency.	
Child's Physician	Phone Number
Name of Child's Health Insurance Company	Health Insurance Policy Number
Name of Emergency Contact #1	Phone Number
Address of Contact #1	
Name of Emergency Contact #2	Phone Number
Address of Contact #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.

## Agreements

1. The parent/guardian gives authorization for the child to participate in field trips.  
Yes \_\_\_\_\_ No \_\_\_\_\_
2. The childcare center agrees to notify the parent/guardian whenever the child becomes ill, and the parent/guardian agrees to pick up the child as soon as possible after being notified.
3. The parent/guardian authorizes the childcare center to obtain immediate medical care if any emergency occurs when he or she cannot be located immediately.\*\*
4. The parents/guardians agree to inform the center within 24 hours or the next business his 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.
5. The center has provided me with a parent handbook and I understand and agree with its contents.

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## Signatures

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Parent (s) or Guardians

Date

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Director or Administrator of Center

Date

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

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

\*\* 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. This statement will release the center of all liability for this issue.

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## Office Use Only Identity Verification

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

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

**Date of Notification of Local Law Enforcement Agency (when required proof of identity is not provided):** \_\_\_\_\_

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 identity from a child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principle 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 programs) or the center transfer responsibility of the child directly to the school (i.e. before school programs). While programs are not required to keep the proof of the child's identity, documentation of the viewing of 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 disposal, physical destruction or other disposition of the proof of identify containing social security numbers shall include all reasonable steps to destroy such as (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means.