

**Kwanwatsi School**  
Registration Form

Enrolment date: \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate: \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

Care Card # \_\_\_\_\_ Status card # \_\_\_\_\_

Child's SIN #: \_\_\_\_\_

Mother's Name \_\_\_\_\_ work # \_\_\_\_\_

Father's Name \_\_\_\_\_ work # \_\_\_\_\_

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

Telephone # Home \_\_\_\_\_

Family Doctor: \_\_\_\_\_ #: \_\_\_\_\_

Dentist: \_\_\_\_\_ #: \_\_\_\_\_

Emergency Contact (other than parents)

Name	Telephone number
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1. _____	#: _____
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2. _____	#: _____
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3. _____	#: _____
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Name and age of other children in the family/ house:

_____	Age: _____	_____	Age: _____
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_____	Age: _____	_____	Age: _____
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_____	Age: _____	_____	Age: _____
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Has the child had previous experience in a child care setting? Yes or No

Does your child feel comfortable leaving parents? Yes or No

Special instructions concerning care, medication, diet: \_\_\_\_\_

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Is there a custody agreement in place? Yes or No  
(If yes please attach copy of agreement.)

Does your child have any known health problems? Yes or No  
(If yes please explain:) \_\_\_\_\_

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Favorite foods: \_\_\_\_\_

Strong dislikes/ fears: \_\_\_\_\_

Please list all persons authorized to pick up your child:

1. \_\_\_\_\_ #: \_\_\_\_\_

2. \_\_\_\_\_ #: \_\_\_\_\_

3. \_\_\_\_\_ #: \_\_\_\_\_

4. \_\_\_\_\_ #: \_\_\_\_\_

5. \_\_\_\_\_ #: \_\_\_\_\_

I give permission for my child to participate in:

Spontaneous walks in the neighbourhood: Yes or No

Taking your child's picture: Yes or No

To call an ambulance: Yes or No

Field Trips in the community: Yes or No

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Kwanwatsi Supervisor Signature: \_\_\_\_\_