

Chapel Hill Day Care Center



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E-mail: chdcc@bellsouth.net

401 Kildaire Road Chapel Hill, NC 27516
<http://www.chapelhilldaycarecenter.com/>

Date: _____

Name of child: _____

Address: _____

Home Phone: _____

Birthday: _____ Race: _____

E-mail Address for center information: _____

Father's Name: _____

Where Employed: _____

Business Phone: _____

Home Address: _____

Home Phone: _____

Mother's Name: _____

Where Employed: _____

Business Phone: _____

Home Phone: _____

If child is not living with parents, name of responsible adult.

Guardian: _____

Home Phone: _____

Where Employed: _____

Business Phone: _____

Home Address: _____



When would you like care to begin? _____

Has your child had previous child care experience? Please describe.

Does your child have any known allergies? Please explain. _____

This is a very creative/messy school. We encourage the children to learn and grow through active participation and exploration. We go barefoot and shirtless in the summer and love to play in the mud. We go outside each day regardless of the heat or cold. We finger paint frequently and have a great time with water play. Does this appeal or appall?

Are there any restrictions (religious, philosophical, dietary) you would wish to observe at school?

What are the aspects of group care that concerns you most?

Do you or anyone in your family have special skills you would be willing to share?

Please give additional information concerning your child, which will be helpful in his/her experience in-group care (favorite games, toys, fears, eating habits, techniques for comforting, etc.)

Signature _____



Please send this form with a \$50.00 non-refundable registration fee to:

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