



Art and Science Kids Enrollment Authorization

Child's Last Name, First Name _____
Nickname

Date of Birth _____
Enrollment Date _____
Age at Entry

For which programs are you enrolling your child?

- Outdoor Preschool** **Art with Ariana** **Forest Fridays** **Private Tutoring** **Willow Room**

Parent or Guardian's Name (First, Last) _____
Relationship

Home Address (Street, City, Zip)

Mailing Address

Home Phone Cell Phone Email Address

Employer and Work Hours Address (Street, City, Zip) _____
Work Phone

Parent or Guardian's Name (First, Last) _____
Relationship

Home Address (Street, City, Zip)

Mailing Address

Home Phone Cell Phone Email Address

Employer and Work Hours Address (Street, City, Zip) _____
Work Phone

Please list any medical conditions, allergies, or dietary restrictions.

Does your child have any special educational needs?

No Yes

If yes, List any health partners or providers you would like us to know about.

Emergency Contacts: person other than parent or guardian that is authorized to pick up child

_____ Name (First, Last)	_____ Phone	_____ Relationship
_____ Name (First, Last)	_____ Phone	_____ Relationship

Medical/Dental Contact Information

Insurance Provider and Policy Information (if applicable)

_____ Primary Physician Name	_____ Phone
_____ Dental Provider	_____ Phone

My child may be taken on field trips or excursions by bus or private motor vehicle, as well as on neighborhood walking excursions under required supervision.

Yes No

My child may participate in water activities under required supervision.

Yes No

In an emergency Art and Science Kids has my permission to call an ambulance, or take my child to any available physician or hospital at my expense to obtain medical treatment. In most emergencies, 911 is called and the child is transported to the nearest hospital and treated by the on-call physician. The parent or guardian of the child is notified as soon as possible.

All primary caregivers must sign below:

_____ Parent/Guardian Signature	_____ Date
_____ Parent/Guardian Signature	_____ Date

Photo Video Release: I hereby give permission to Art and Science Kids to use my photos and likeness and the photos and likeness of my child in all forms and media for advertising, portfolio, demo, trade, stock photography, editorial, editing without restrictions, internet posts, and all other lawful purposes. I understand I am entitled to no compensation. I release the photographer and videographer from all forms of claims and liability related to photo usage.

All primary caregivers must sign below:

Parent/Guardian Signature	Date
---------------------------	------

Parent/Guardian Signature	Date
---------------------------	------

Liability Release: As legal guardian of the students listed below, I hereby release, waive, discharge and agree not to sue Art and Science Kids, the Illinois Valley Family Coalition, the City of Cave Junction, Oregon State Parks, Josephine County, the employees, volunteers, participants, instructors, owners and leases of the premises from liability to the attendees, their personal representatives, assigns, heirs and next of kin, for any and all loss or damage, and claim of demands therefore on account of injury to the person or property while participating in the preschool. I hereby assume full responsibility for the listed attendees' actions and the risk of bodily injury or property damage due to their negligence. I release or otherwise hold harmless Art and Science Kids while they participate in children's programming. I understand that the children will be playing in natural environments with naturally occurring hazards such as water, rocks, twigs and bugs. I understand that Cave Junction is an urban area with hazards such as city streets, moving vehicles, and uneven surfaces. I expressly acknowledge and agree that the activities can involve risk or injury. I state that the attendees listed below are physically able to participate in the activities of Art and Science Kids. I further expressly agree that the forgoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the state of Oregon. For the listed attendees and myself, I have read and voluntarily sign the release and waiver of liability and indemnity agreement, and further agree that no oral representations, statements or inducements, apart from the foregoing written agreement, have been made. For the listed attendees and myself, I will not hold Art and Science Kids responsible for any accidental injury that might occur during this program.

All primary caregivers must sign below:

Parent/Guardian Signature	Date
---------------------------	------

Parent/Guardian Signature	Date
---------------------------	------

Parent Handbook: I hereby acknowledge receipt of the handbook, and I agree to abide by all policies and requirements for enrollment in Art and Science Kids programming. I agree to pay tuition on time for each month of enrollment. I agree to contact Art and Science Kids promptly if our plans change.

All primary caregivers must sign below:

Parent/Guardian Signature	Date
---------------------------	------

Parent/Guardian Signature	Date
---------------------------	------

Child General Information (To be filled out with staff at intake meeting)

Has your child previously been in child care? **No** **Yes**

If yes, what type of child care and for how long? _____

Does your child attend a school? **No** **Yes**

If yes, what is the school's name, grade level, and teacher? _____

Why are you enrolling your child with Art and Science Kids? _____

What are your child's likes and dislikes? _____

Please describe your child's eating habits and schedule. _____

Please describe your child's toileting habits and schedule. _____

Please describe your child's sleeping habits and schedule. _____

How does your child like to play? _____

What are your child's fears? _____

How does your child like to be comforted when upset? _____

What language does your child speak at home? _____

Please list any special words your child uses and their meanings. _____

Are there family cultural backgrounds, traditions, beliefs, or interests you would like to share with us? _____