NORTH STAR CHILD CARE STUDENT CONTACT FORM						
	S INFORMATION					
Child	Nickname	Date of Birth		Sex		
Address	I		Home Phone	Ś		
Chronic Physcial Problems/Pertinent Developmental Information/Special Accomodations Needed						
Previous Child Day Care Programs and Schools Attended						
If Child Attends this Center and Another School/Program, Give Name of School/Program			Grade			
PARENT(S)/GUARDIAN(S) INFORMATION						
Father	Place Employed		Business Phone			
Home Address Home/C				ione		
Mother	Place Employed		Business Phone			
Home Address			Home/Cell Phone			
Person(s) or Agency Having Legal Custody of Child						
Home Address			Home/Cell Phone			
Business Address			Business Phone			
EMERGENCY INFORMATION						
Allergies or Intolerance to Food, Medication, etc., and Action in an Emergency						
Child's Physician			Phone			
Two People to Contact if Parent(s) Cannot Be Reached 1.	Address 1.		Phone 1.			
2.	2.		2.			
Person(s) Authorized to Pick Up Child						
Person(s) NOT Authorized to Pick Up Child						
Email Address:						



5407 Peters Creek Road Roanoke, VA 24019 **CHILD** (540) 366-3629

North Star Child Care Agreement

- 1. North Star Child Care agrees to notify the parent/guardian whenever the child becomes ill and the parent/guardian will arrange to have the child picked up immediately.
- 2. The parent/guardian authorizes North Star Child Care to obtain immediate medical care if any emergency occurs when the parent/guardian cannot be located immediately.
- 3. The parent/guardian agrees to inform the center within 24 hours or the next business day after his/her child or any member of the immediate family has developed a reportable communicable disease, as defined by the State Board of Health except for life-threatening diseases which must be reported immediately.
- 4. The parent/guardian gives authorization for the child to participate in North Star Child Care's transportation and field trips, including swimming.
- 5. The parent/guardian has received the handbook and agrees to all the rules and regulations of North Star Child Care.
- 6. The parent/guardian agrees to give one week written notice prior to withdrawing their child from North Star Child Care. Charges will be applied unless notified in writing.
- 7. The parent/guardian agrees that if this account is delinquent by more than 30 days that the parent/guardian agrees to pay all costs of the collection of this account including court costs and reasonable attorney fees which the parent/guardian agrees shall be thirty three and a third (33 1/3 %) of the outstanding balance of the account.

SIGNATURES

Female parent/guardian		date	
Male parent/guardian		date	
OFFICE USE ONLY- IDENTITY	VERIFICATION		
Place of Birth	/Birthdate	/Birth certificate #	
Date Issued	Other form of proof		
Administrator		date	
Date Child Entered Care	C	Date Left Care	