



Application

Child name _____

Address _____

Street

City

Zip

Home Phone/Cell Phone/Pager _____

Birthdate _____ Birthplace _____

Father or Guardian's Name _____

Telephone number at work _____

Email Address _____

Mother or Guardian's Name _____

Telephone number at work _____

Email Address _____

Child lives with: (Check one) Both parents _____ Mother _____ Father _____

List the name and birthdate of all children living in your home:

Family Doctor _____ Telephone _____

Address _____

In the event I cannot be reached, please call (these individuals are also authorized to pick-up my child):

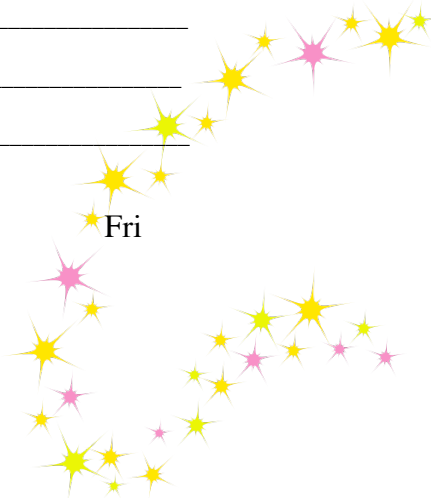
Name	Phone	Relation to the Child	Address
1. _____	_____	_____	_____
2. _____	_____	_____	_____

List any serious allergies (such as insect bites, food allergies, etc.)

List any disabilities or special needs _____

Has the child ever attended any other day-care (if yes which one) _____

Day the child will attend: Mon Tue Wed Thu Fri
(Please circle)





Permission to Photograph and use Social Media

(pozwolenie na robienie zdjęć)

I, _____
(parent's or guardian's name)

give permission for. **Fantazja llc**

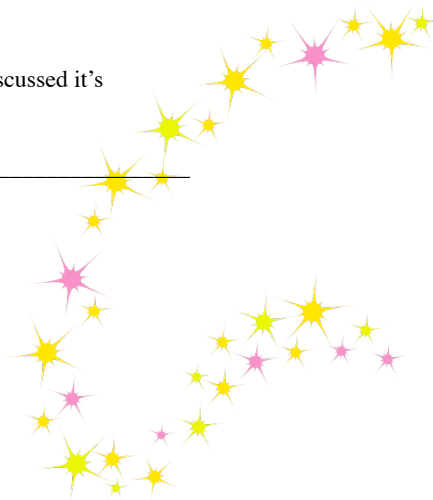
to photograph also to use my child on Fantazja LLC social Media pages

(child's name)

Parent Signature	Date
------------------	------

DAY CARE CENTER INFORMATION PACKET

This is to acknowledge that a staff member has provided me with an information packet and discussed it's contents.





Dear Parent:

In keeping with the New Jersey's child care center licensing requirements, we are obliged to provide you, as the parent of a child enrolled at our center, with this informational statement.

The statement highlights, among other things: you right to visit and observe our center at any time without having to secure prior permission; the center's obligation to be licenses and to comply with licensing standards" and the obligation of all citizens to suspected child abuse/neglect/exploitation to the state child abuse hotline 1 (877) NJ ABUSE.

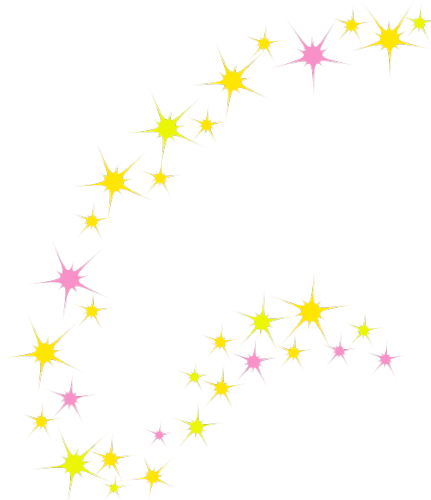
Sincerely,

Director of Fantazja Przedszkole

Name of the Child: _____

Name of the Parent(s): _____

I have read and received a copy of the information to Parents statement prepared by the office of licensing, Child care & youth Residential Licensing, in the Department of Children and Families.





Field Trip Authorization (pozwolenie na wycieczki)

I, _____
(parent's name)

grant permission for **Fantazia Llc**

to transport my Child _____
(child's name)

for the following events:

Local park, Local business, Local farm, amusement park

I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above events.

Signed:

(parent signature, and date)

