



# REGISTRATION & EMERGENCY INFORMATION FORM

**OFFICE USE ONLY**

Date of Admission: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Nickname: \_\_\_\_\_ OHIP #(optional): \_\_\_\_\_

Allergies: \_\_\_\_\_

<b>GUARDIAN'S NAME:</b>	<b>GUARDIAN'S NAME:</b>
Phone Number:	Phone Number:
Cell:	Cell:
Address:	Address:
Employer, Occupation & Work #:	Employer, Occupation & Work #:
Work Hours:	Work Hours:

Please list below the people who may be contacted in an emergency and are also the persons to whom the child may be released \*\*\*Please note anyone picking up your child must have Picture Identification\*\*\*

<b>Name:</b>	<b>Name:</b>	<b>Name:</b>	<b>Name:</b>
<b>Address:</b>	<b>Address:</b>	<b>Address:</b>	<b>Address:</b>
<b>Home #:</b>	<b>Home #:</b>	<b>Home #:</b>	<b>Home#:</b>
<b>Cell# :</b>	<b>Cell #:</b>	<b>Cell #:</b>	<b>Cell #:</b>
<b>Relationship:</b>	<b>Relationship:</b>	<b>Relationship:</b>	<b>Relationship</b>

**EMERGENCY INFORMATION:**

<b>Family Physician:</b>	<b>Family Dentist:</b>
<b>Phone # :</b>	<b>Phone # :</b>
<b>Address:</b>	<b>Address:</b>

I, \_\_\_\_\_ (parent/guardian), hereby grant my consent for my child to be given emergency treatment by a staff member at Child's Paradise Daycare Centre and for my child to be transported by ambulance to an Emergency Centre for treatment in an emergency. In the event that I cannot be contacted immediately during a medical emergency, I also grant my consent for my child to be given emergency medical or surgical treatment by a treating physician and hold Child's Paradise Daycare and its employees harmless.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## CHILD DEVELOPMENT

In order for us to provide quality care for your child, we need to understand a bit about the child developmental history. Feel free to write in as much information as you like. Use the reverse side of this form if necessary.

### ACTIVITIES

Please list your child's favourite toys and activities: \_\_\_\_\_

How do you consider your child's activity level: Normal\_\_ Tends to get hyper\_\_ Prefers quiet activities\_\_ Prefers outdoors\_\_

### HEALTH

Regular Medication: \_\_\_\_\_

Allergies and Sensitivities: \_\_\_\_\_

Any Other Allergies: \_\_\_\_\_

Immunization Record: \*Please provide copy\*

Date of Last Immunization: \_\_\_\_\_

Any Special Health Conditions: \_\_\_\_\_

Child will need the following special provisions: \_\_\_\_\_

Is there anything we should know about your child's physical or mental health: YES \_\_ NO \_\_

If yes, please elaborate: \_\_\_\_\_

Has your child been hospitalized? Explain: \_\_\_\_\_

Has your child had any injuries with fractures or loss of consciousness? Explain: \_\_\_\_\_

Last vision date: \_\_\_\_\_ Last physical examination: \_\_\_\_\_

### **Does your child have problems with (circle all that apply):**

Constipation Convulsions Diarrhea Fainting Spells Frequent Colds Skin Rash Ringworm Stomach Upsets  
Lice Worms Sore Throats Ear Infections Soiling

### **Has your child had any of these diseases (circle all that apply):**

Asthma Bronchitis Chicken Pox German Measles Measles Hepatitis Impetigo Diabetes Heart  
Disease Scarlet Fever Mumps Polio Whooping Cough

### SLEEPING HABITS

Does your child nap: YES \_\_\_\_ NO \_\_\_\_ Regular nap-time schedule? YES \_\_\_\_ NO \_\_\_\_ At what time? \_\_\_\_\_

Does your child have a favourite toy/blanket that he/she likes to sleep with: YES \_\_\_\_ NO \_\_\_\_

Elaborate: \_\_\_\_\_

### TOILET HABITS

Is your child toilet trained: YES \_\_\_\_ NO \_\_\_\_

What word does your family use for urination: \_\_\_\_\_ For bowel Movements: \_\_\_\_\_

Does your child have accidents: YES \_\_\_\_ NO \_\_\_\_

If yes, please explain how you handle this: \_\_\_\_\_

Does your child wear diapers during nap-times: YES \_\_\_\_ NO \_\_\_\_

### ADJUSTMENT

Do you expect any adjustment difficulties when your child begins care? Explain: \_\_\_\_\_

Previous Child Care attended: \_\_\_\_\_ Any problems at previous childcare: \_\_\_\_\_

## **SOCIAL DEVELOPMENT**

Is your child used to playing with other children: YES\_\_\_\_ NO \_\_\_\_

Does your child have trouble separating from you when being dropped off? YES \_\_\_\_ NO\_\_\_\_

If yes, what do you do to assist your child: \_\_\_\_\_

Does your child make shy or have trouble adjusting to new places and faces: YES\_\_\_\_ NO\_\_\_\_

If yes, how do you assist your child: \_\_\_\_\_

Does your child tend to run away: YES\_\_\_\_ NO \_\_\_\_

How does your child express anger or frustration: \_\_\_\_\_

Does your child tend to throw temper tantrums: YES\_\_\_\_ NO\_\_\_\_

If yes, how do you handle this: \_\_\_\_\_

When your child is upset, what do you do to comfort him/her: \_\_\_\_\_

Does your child have any special fears: \_\_\_\_\_

What method of discipline do you use with your child: \_\_\_\_\_

Is there anything you are concerned about with your child's social development: YES \_\_ NO\_\_

If yes, please elaborate: \_\_\_\_\_

## **LANGUAGE DEVELOPMENT**

Is your child using words: YES\_\_\_\_ NO\_\_\_\_

Does your child speak in sentences: YES\_\_\_\_ NO\_\_\_\_

Is a second language spoken in your home: YES\_\_ NO\_\_ What language: \_\_\_\_\_

Does your child have difficulty with his/her speech: YES\_\_\_\_ NO\_\_\_\_

If yes, please elaborate: \_\_\_\_\_

## **FOODS**

What foods does your child like: \_\_\_\_\_

What foods does your child dislike: \_\_\_\_\_

What do you do when your child refuses to eat: \_\_\_\_\_

What drinks does your child prefer: \_\_\_\_\_

Does your child drink a lot of fluids: YES\_\_\_\_ NO\_\_\_\_

Would you describe your child's appetite as: GOOD\_\_\_\_ OKAY\_\_\_\_ NOT GOOD\_\_\_\_

## **FAMILY LIFE**

### **Parents are:**

Married \_\_ Living Together \_\_ Divorced \_\_ Separated \_\_ Widowed \_\_ Single \_\_

If applicable, Parent/Guardian with Legal Custody: \_\_\_\_\_

Can you please tell me who else lives at home with you and your child:

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Relationship: \_\_\_\_\_

Please note here any special family concerns we should be aware of: \_\_\_\_\_

## **OTHER**

Anything else you would like us to know about your child (general personality, developmental issues, tendency towards affection, etc): \_\_\_\_\_



# PERMISSIONS

**CREAMS, LOTIONS, SUNSCREENS, and POWDERS** \_\_\_\_\_ Parent Initial: \_\_\_\_\_

I give permission for Child's Paradise Day Care Centre to apply creams (such as Desitin, Vaseline, etc...) and/or hand lotion (such as Vaseline Intensive Care) and/or powders (such as Baby Powder, cornstarch, etc...), and/or sunscreen to \_\_\_\_\_ (child's name) as needed. Application will be done according to the Manufacturer's directions (or parent's instruction as written). **I understand that I need to notify staff if my child brings any Lotions, Powders, Creams, LipBalms, etc... to daycare. I also understand that a Medication Authorization Form needs to be completed for any of these items that have a D.I.N.**

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**WATER PLAY** \_\_\_\_\_ Parent Initial: \_\_\_\_\_

I grant my consent for \_\_\_\_\_ (child's name) to participate in water related activities including but not limited to; water sensory play, small pool and sprinkler activities and water bottles while at Child's Paradise Day Care Centre. I understand these activities will be diligently always monitored.

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**EXCURSIONS OFF DAYCARE PROPERTY** \_\_\_\_\_ Parent Initial: \_\_\_\_\_

I give permission for my child to go for walks within the community and off daycare property.

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**PICTURES AND VIDEOS** \_\_\_\_\_ Parent Initial: \_\_\_\_\_

I hereby grant my consent for \_\_\_\_\_ (child's name) to be photographed and/or videotaped during special events while at Child's Paradise Day Care Centre. I understand that these pictures may be displayed at the Centre or on the Centre's website. Information and documentation (photographs, written notes, etc...) that is given to the parents of the Centre regarding children is confidential. Request for any such information is to be referred to the Director. Parents have the option of requesting photographs of their children. If a parent is in possession of photographs where there are other children besides their own, the parent needs to be aware that this photo is being given for personal use only and is not to be modified and/or distributed for any reason. If you are in possession of another child in the Centre, you acknowledge that you are aware that you are not to distribute, share and/or modify these photographs. You are also aware that the photographs taken by the Day Care Centre remain the actual property of Child's Paradise.

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**SLEEPTIME** \_\_\_\_\_ Parent Initial: \_\_\_\_\_

I am aware and consent for \_\_\_\_\_ (child's name) to sleep on a cot (not crib) in the Program.

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**ADDITIONAL REQUEST PERMISSIONS (i.e. bottles, soothers, etc):**

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Centre-Approved (Signature): \_\_\_\_\_ Parent Signature: \_\_\_\_\_



## CHILD PROTECTION POLICY

The Child's Paradise Daycare Centre recognizes the need to provide a safe and caring environment for our young people. We believe children have the right to be free from the fear or reality of abuse (either physical or emotional). At Child's Paradise Daycare Centre, we are fully committed to protecting the security, privacy, and dignity of the children who take part in our childcare program. The Child's Paradise Daycare Centre has therefore adopted the procedures set out in this document to keep the children in its care free from abuse of any kind.

### STATEMENT OF NOTIFICATION

Before a child will be allowed into care, the parent(s) MUST sign a statement confirming they are aware that the Centre's duty, under the law, is to report suspected child abuse or neglect. The signed statement will be kept in the child's file.

### NOTIFICATION OF INJURY DURING OUT-OF-CARE HOURS

Parents MUST inform the Caregiver of any visible injuries or marks on a child (accidental or non-accidental) as soon as the child arrives. It is in the best interest of the parent to tell the Caregiver how the injury occurred and what action has been taken to care for the injury, if any.

### SUSPICIONS OF PHYSICAL INJURY OR NEGLECT

Under no circumstances will Child's Paradise Daycare Centre carry out its own investigation into the allegation or suspicion of abuse. If child abuse is disclosed or discovered, or it appears that a child has been harmed in some way by his or her parents or other persons, the Caregiver will immediately seek advice from Family and Children's Services and/or Licensing Office prior to speaking with the parents. Suspicions will not be discussed with anyone other than those mentioned above. The family's identity will not be revealed at this point. However, a written documentation will be made and kept in a secure place.

### RESPONDING TO ALLEGATIONS OF ABUSE

If, after this consultation with Licensing Office it is agreed that the matter should be referred to Child Protective Services, the parents will NOT be informed prior to the report being submitted. In serious cases, the Police may be involved without parental consent or knowledge. When warranted, Child's Paradise Daycare Centre will seek medical help for the child if needed, informing the doctor of any suspicions. If there is a concern about signs of neglect of the child or noticeable changes to the child's behaviour or temperament, the Supervisor and/or Administrator will discuss these concerns with the parents. If the concerns are not addressed in a forthright or satisfactory manner, the parents will be informed that the matter will be handed over to Family and Children's Services/Child Protective Services.

### ALLEGATIONS OF SEXUAL ABUSE

In cases where the Centre suspects that the child may have been sexually abused, the Centre will contact Child Protective Services WITHOUT informing the parents. The Centre will then seek and follow the advice given by Family and Children's Services and/or the Licensing Office regarding contacting the Police. The Caregiver will confirm its advice in writing for future reference.

### INVESTIGATING A REPORT

If a report to Child Protective Services triggers an investigation, the written documentation may be handed over to the investigating party. This documentation will contain the following information:

- Ⓞ The child's name, address, date of birth, parents' names, doctor's name;
- Ⓞ Particulars of the suspected abuse, what the concerns are, and how or why they have arisen;
- Ⓞ Signs or evidence of the suspected abuse;
- Ⓞ The type of injury and the location of the injury on the child;
- Ⓞ Any medical treatment that was sought for the injury;
- Ⓞ Any recent noticeable changes in the child's behaviour or temperament;

- Ⓞ Suspected perpetrator information (if known or if divulged by the child);
- Ⓞ Any previous concerns about the child or other children in the family;
- Ⓞ Any family problems that have occurred;
- Ⓞ Medical history of the child, if applicable;
- Ⓞ Any other people, agencies, organizations that are involved with the child or family (if known);
- Ⓞ Results of the consultation with the parents, their reaction to the concerns, etc.;
- Ⓞ A list of any agencies that have become involved as result of contact from the Centre about the suspicion of abuse;
- Ⓞ Name of the person making the report;

If, following an initial inquiry, the concerns are not substantiated, the parents will be informed, and the matter will be terminated. The parents may, however, be offered on-going help.

If the inquiry reveals that the child is/has been harmed in some way, various courses of action may be taken depending on the circumstances of the case. It will be up to Family and Children's Services or the Police what course of action will be taken after this point. Child's Paradise Daycare Centre will no longer be involved in the matter unless requested to be so by the investigating body.

#### TRAINING OF WORKERS, VOLUNTEERS & SUBSTITUTE STAFF

Child's Paradise Daycare Centre recognizes that it is the responsibility of each one of its staff, paid and unpaid, to prevent the neglect, physical, sexual or emotional abuse of children and to report any abuse discovered or suspected. Child's Paradise Daycare Centre will ensure that all staff will be trained in accordance with the principles set out in this Child Protection Policy. All staff will be aware of the appropriate reporting procedure. Staff will inform their Supervisor or other designated person appointed to handle suspicions of child abuse.

#### HELPING CHILDREN TO UNDERSTAND ABUSE

The Child's Paradise Daycare Centre will arrange for training for its young children to learn more about good and bad touching, abuse, and when to talk to someone if they feel they have been abused in any way. Such training will involve the use of age-appropriate books and activities as recommended by the local librarian and FCS and Health Services departments. When applicable, Child's Paradise Daycare Centre will invite a member of Health Department or Child Protection Services in to talk with the children. We will also seek out any programs that can help us in the endeavour.

#### PARENTAL CONSENT & ACKNOWLEDGEMENT FORM

**Please read the *Child Protection Policy* before signing this form.**

By signing this Parental Consent and Acknowledgement Form, I acknowledge and agree that:

1. I have read and understood the *Child Protection Policy* of Child's Paradise Daycare Centre;
2. To the extent that I have had questions concerning any of those policies or statements, I have contacted Child's Paradise Daycare Centre and those questions have been answered to my satisfaction;
3. I am the Child's parent or legal guardian with full right to consent to this acknowledgement;
4. I consent to my Child's enrolment at Child's Paradise Daycare Centre, and for the safety and well-being of my child, I also consent to the collection of personal information about my Child in the manner described in the *Child Protection Policy* should the Caregiver become suspicious of any type of abuse of my child; and
5. My Child and I/We will be bound by the terms outlined in this *Child Protection Policy*.

**Parent/Guardian's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_