The Ultimate Childcare Enrollment Packet Template



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What Should Your Childcare Enrollment Packet Include...

Your childcare enrollment packet includes the application forms that parents must complete to get their children started in a new childcare program. A complete enrollment packet should cover every aspect of the enrollment process, including:

Enrollment Application: Get basic identifying information about parents and children so you know who they are and can contact them.

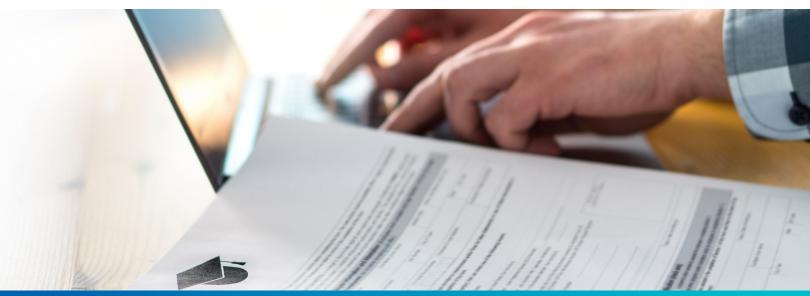
Emergency Contacts/Release Authorization: Collect contact information in case of an emergency.

Consents and Agreements: Verify that parents have been made aware of important information about your center, including mandatory disclosures, policies and standard operating procedures.

Medical Information: Collect medical information about the child that is necessary to ensure the child's safety and meet regulatory requirements.

About the Family: Understand more about the child you're enrolling and prepare to make them feel welcome during their first week.

Required State Forms: Some states require childcare centers to collect certain information and retain records about the children they care for and their families. Other states have mandatory disclosure laws that require childcare centers to provide specific notifications or disclose certain information to parents.



Why Your Enrollment Packet is Important...

A detailed childcare enrollment packet can have a positive impact on your business. Here's what you can accomplish with a great enrollment packet.

Make a Good First Impression

Your enrollment packet could be one of the first documents parents receive from your childcare center. That's why it's important to make a good first impression. If your enrollment form is detailed and well-organized, you're already building trust with parents and helping them feel comfortable about choosing your center.

Ensure Child Safety

In order to keep your enrolled children safe, you need access to personal information about each child, including their medical history, food or environmental allergies, and who is authorized to pick them up from the center. All of these details need to be collected and verified before the child begins attending the center, and there's no better opportunity than your childcare enrollment packet.

Learn About the Child

Many childcare centers use their enrollment packet to start learning about the child's unique personality, likes and dislikes, favorite toys and games, biggest challenges and other characteristics. Childcare providers can use this information to plan activities that appeal to the child's interests, address their biggest challenges, and accelerate their development.

Comply With Local/State Regulations

Some states require childcare centers to collect certain information and retain records about the children they care for and their families. Other states have mandatory disclosure laws that require childcare centers to provide specific notifications or disclose certain information to parents. These requirements can be satisfied by adding more information or additional fields to the enrollment packet.

Your Childcare Enrollment Packet does more than register a family at your center—it helps you collect data about children and their families, supply parents with the most current information about your center and ensure a smooth transition into the childcare environment. Make sure your childcare enrollment package is **capturing the information you need to comply with state regulations and deliver the best possible care.**

Enrollment Application

		• •			
Child's Information					
First Name:	Middle Name:	Aiddle Name: Last N		Name:	
Date of Birth:	Sex/Gender: □ N	∕Iale ☐ Female	Heigh	t & Weight:	
Home Street Address:		City:		State:	Zip:
Parent/ Guardian Information					
Parent/ Guardian 1					
First Name:	Last Name:		Relati	ionship to ch	nild:
Email:	Cell Phone:		Home	e phone:	
Home Street Address:	•	City:		State:	Zip:
Employer:			Work	rk Phone:	
Parent/ Guardian 2					
First Name:	Last Name:	Last Name: Relati		ionship to child:	
Email:	Cell Phone:	Cell Phone: Home		e phone:	
Home Street Address: (if different fo	orm child)	City:	•	State:	Zip:
Employer: Work Phone:					
This information helps us to unders	tand the family d	ynamics as well	as who	we should	consider to be our customer.
Parent Status- Parents are: 🔲 Si	ngle 🗖 Marri	ed 🖵 Separa	ated	☐ Divorce	ed 🗖 Other
Who is enrolling the child?	☐ Parent/ Gu☐ Parent/ Gu☐ Other			If other, er	nrolling person's name
Who is responsible for payment?	☐ Parent/ Gu☐ Parent/ Gu☐ Other			If other, re	sponsible person's name
Is there any legal paperwork pertaining to your child that we should be aware of? (This can include custody agreements, IEP paperwork, etc.) YES NO If yes, please explain.					

Emergency Contacts/ Release Authorization

Emergency Contact Information

- The people listed in this section will only be allowed to pick up and drop off the child, they will not be allowed to view, make changes to the child's file, or receive any information pertaining to your child. They must be over the age of 18 and will be contacted if parents/guardians cannot be reached in the event of a medical or other emergency. Each person should be listed individually.
- Your child will only be released to the people listed on this form. If you want a person who is not already on this list to pick up your child even for one day, please notify our staff in writing. The written request must include the name and ID number of the person authorized to pick up your child. Your child will not be released without prior authorization.
- For the safety of all children and staff: We request that any authorized pick-up person provide staff a photo ID at the time of pick up.

Emergency/ Authorized Release Person		☐ Emerge	ncy Contact	☐ Authorized Release Person		
First Name:	Last Name:	_ast Name:		Relationsh	ip to child:	
Cell Phone:	Home Phone:			Work phone:		
Home Street Address:		City:		State:	Zip:	
ID State		ID Number				
Emergency/ Authorized Release Perso	n		☐ Emerge	ncy Contact	☐ Authorized Release Person	
First Name:	Last Name:			Relationship to child:		
Cell Phone:	Home Phone:	Home Phone:		Work phone:		
Home Street Address:	City:			State:	Zip:	
ID State		ID Number	ID Number			
Emergency/ Authorized Release Person			☐ Emerge	ncy Contact	☐ Authorized Release Person	
First Name: Last Name:			Relationsh	ip to child:		
Cell Phone:	Home Phone:			Work phone:		
Home Street Address:		City:		State:	Zip:	
ID State ID Nu		ID Number	D Number			

Consents and Agreements

My i	nitia	ls on each statement indicate my understanding and agreement:
Trans	spor	tation/ Off site and Outdoor Play
	1.	I give the childcare center permission to transport my child in its van or any other mode of transportation operated by the childcare center.
	2.	I give the childcare center permission to take my child outside daily as part of the scheduled curriculum.
	3.	I give permission for my child to participate in water activities, such as wading in pools, sprinklers, water balloons, and other water related activities.
Tuiti	ons	and Associated Fees
		I agree to pay a weekly tuition rate of \$ This rate is subject to change and will be adjusted due to tuition increases upon thirty (30) days prior written notice or scheduled program changes.
	5.	I agree to pay a non-refundable application fee of \$ at time of enrollment. If I withdraw my child, his/her position may be filled by someone on the waiting list. If I choose to re-enroll, I agree to pay a new application fee and understand re-enrollment is contingent on available classroom space.
		I agree to pay a re-registration fee of \$, May 1st of each year. If my child's start date is between February 1st and May 1st, the re-registration fee will not be charged for that year. Payment of this non-refundable re-registration fee in May, this along with a security deposit, will also secure the child's spot for the fall academic school year.
	7.	I agree to pay a security deposit of \$which is equal to one week of tuition. If tuition should increase, I agree to pay the difference to equal my weekly tuition rate. If tuition should decrease, my security deposit will be adjusted.
	8.	A Family Discount of 10% will be received on the lowest tuition when enrolling 2 or more full-time siblings.
		I agree to pay for any incidental fees related to my child's enrollment at the childcare center for receipt of services; for example, I agree to pay all fees related to field trips and activities, including summer activities. I agree to pay such incidental fees in advance when possible but no later than on the next day on which I pay tuition.
		I agree to pay tuition Monday of each week that childcare is provided for my child. There is no tuition deduction for illness, holidays, an annual staff development day, or when the childcare center is closed due to weather related emergencies, acts of God or other circumstances beyond the control of the childcare center, including but not limited to power, gas or water outages, and states of emergency.
	11.	If there is an outstanding balance on my account at close of business on Wednesday, I agree to pay a late charge of \$ I agree to pay my account in full by Friday of that week. If my account is not paid in full by Friday, suspension of care may result, without further notice.

	12. Should a check be returned for insufficient funds, a fee of \$ will be assessed to my account. If more than two checks are returned within a six-month time period due to insufficient funds, payment must be made by certified check or money order for a period of six months.
	13. Payment transactions by credit card will be assessed a surcharge of 1.99%.
	14. A late fee of \$1.00 per minute per child will be charged if my child is in care past the normal operating hours. This fee will be paid to the childcare center when I pick my child up after normal operating hours. If my child is in care more than 15 minutes after closing, every attempt will be made to locate the emergency contacts. If a contact cannot be located within two hours, Child Protective Services may be contacted.
	15. In the event I elect to change my child's program or withdraw my child from the childcare center, I agree to provide two weeks advance notice <i>in writing</i> to the Director. I understand my last week of tuition will be paid by my security deposit. In the event my security deposit does not cover the balance due, I agree to pay any outstanding balance before my child's last day of care.
	16. I understand I will be responsible for the weekly tuition for any reversal of my decision to around program changes or dis-enrollment that happens within a two-week period of the last day of care.
	17. I agree that if my account balance remains unpaid for thirty (30) days, I will be assessed a finance charge of 1½% per month on the amount outstanding. If any payment or other charge is not made when due, in addition to other remedies available to the childcare center, the childcare center reserves the right to take legal action to collect all charges due, and may also recover legal fees, court costs, administrative fee for collections, and related expenses.
	18. If an employee from the childcare center is subpoenaed to testify in connection with or required to participate or cooperate in any litigation, claim or case I am involved in, I will reimburse the childcare center for any costs incurred, including costs related to the employee's time and expenses, legal fees and/or court costs.
Rele	ase Agreement
	19. I, for myself and my successors and assigns, as parents, legal guardians or authorized custodians of my child, hereby release the childcare center and each of its successors, affiliates, employees, and representatives from all claims, suits, losses, liabilities and judgments of whatever kind arising from or related to or in connection with my child's enrollment with the childcare center including, without limitation, any loss or injury sustained by my child or myself as a result of my child's participation in activities sponsored or conducted by the childcare center and/or its employees, excluding only intentional torts performed by an employee of the childcare center during the time my child is in the care and custody of the childcare center.
	20. The childcare center does not condone and will not accept liability for care services provided by employees of the childcare center outside standard childcare center business hours or off the childcare center premises.
	21. The childcare center reserves the right to immediately dis-enroll a child in its sole discretion for: (1) inappropriate conduct (as determined by the childcare center) by the child or parent; (2) when tuition is in arrears, or (3) if the parent does not provide, upon request, a current written pediatrician's certification that a child is healthy and able to participate in the childcare center's programs without exposing other children to health risks.
Sche	dule of Available Care
	22. Children attending part-time may not alternate their days. Additional charges will be assessed as determined solely by the childcare center. This includes additional fees that may be assessed for children in before and after care programs when there are school closings, delayed opening or early dismissal days and for transition weeks from the academic school year to summer and from summer into the academic school year.
	23. Holiday closings are New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving and Christmas. The childcare center will close at 4:00 p.m. on Christmas Eve and New Year's Eve.

24. S	should one of the holidays fall on a Saturday, the childcare center will be closed the Friday prior.
Photograp	hy & Media
I	give the childcare center permission to photograph or videotape my child with the intent to use these naterials for promotional, advertisement or educational purposes.
I	give the childcare center permission to monitor my child through a closed-circuit security system operated by the childcare center.
	understand that is a no cellphone facility. Parents are to not be using their phone when they enter the acility.
р	Online safety is a top priority for us so your child's first and last name will never be disclosed online. The photos of children back to camera are taken by teachers may be posted to: business website and/or social media platforms. Photos and videos are only posted from company sponsored pages.
Medical Au	uthorizations
29. 1	give the childcare center permission to put sunscreen on my child, which I have provided.
I	give the childcare center permission to use baby wipes, diaper rash ointment and/or other accoutrements on my child, which I have provided.
31. I	understand dander and non- dander producing small pets may be present in the classroom
Acknowled	dgement
32. I	acknowledge that I have access to the childcare center family handbook as found in the parent resource area of the childcare center public website at www.the childcare center.com
a	

Medical Information

Child Medical Information		
Please be honest and as detailed as pos	ssible, this information will help us to be	more informed on your child's medical
	our abilities. There may be additional do	· ·
need from you and/or your child's phys	sician.	
Pediatrician		
Name	Address	Phone
Doublet		
Dentist	Address	Dhana
Name	Address	Phone
Health Insurance Information		
Carrier	Policy Number	Phone
Special Needs		
Do you have any concerns about your o	child's development?	□ No
If yes, please let us know if you have sp	oken to the physician about your concer	rns and if you have had any
screening/tests done (vision, hearing, s	peech, developmental.)	,
Does your child currently have any limi	tations to physical activity? Yes	☐ No
If Yes, please explain.		
		DN
Does your child require any special equ	ipment for daily activities? Yes	□ No
If Yes, please explain.		
Has your child had any serious injuries	or hospitalizations that we should we be	e aware of?
If Yes, please explain.	or nospitalizations that we should we be	aware or: Tes Tivo
ii res, piedse explain.		
Allergies and Medication		
Does your child require medication or t	reatment every day or as needed?	☐ Yes ☐ No
,	cine, dosage, how many times per day ar	nd time taken, prescribing physician.
, ,		
Does your child have any known allergi		
If yes, please explain and list any presci	ibed medications.	

Medical Consents and Agreements Immunizations 1. I understand that my child must be current on all immunizations per state licensing regulations prior to enrollment and I am responsible for providing a copy of updated shot records as they are available to them. 2. I understand that I have the right to immunize my child as I deem fit. I have attached a copy of the immunizations that my child has along with a statement stating philosophical reasoning as to why I choose for certain immunizations. 3. I understand that I will only be given a one-week grace period to provide shot records to center administration (upon enrollment and for expired records). After one week, my child will not be allowed to return to the childcare facility without documentation from the child's health care provider **Medical Authorizations** 4. In the event of a medical emergency, I authorize the center staff to administer first aid, CPR, and or secure emergency medical treatment for my child. I understand that I will be notified as soon as possible, which may be after treatment has already begun. 5. If transportation to a hospital/clinic is necessary and a parent or emergency contact is not available to bring the child immediately, I give consent for my child to be transported by or emergency medical services. **Medication Administration** 6. All medications will be kept in a locked medicine box, this is for your child's safety as well as the safety of other children. Medicine is not allowed to stay in the children's bags or cubbies ever. **Toilet Training** 7. I understand that when the time comes for my child to start toilet training it is my responsibility to discuss it with the teacher and discuss a plan that works for both the childcare center teacher within the guidelines of the policy on toilet training.

All About Me

Child Development	tal Insights				
		•		elieve that education	
	d childcare/ school.	To begin this comm	unication, please tal	ke some time to tell u	us a little about
your child.					
Child Information			T		
Child First Name			Child Last Name		
Child Date of Birth			Child Nickname		
Schedule of Care	T	T =	T		1 =
Arrival	Mon AM	Tue AM	Wed AM	Thurs AM	Fri AM
Departure	Mon PM	Tue PM	Wed PM	Thurs PM	Fri PM
Home Environmen	t				
Child Lives with:					
Child's Ethnic Back	ground:				
Primary Language	spoken at home:				
Other languages sp	ooken at home:				
Significant people	in child's life:				
Holidays celebrate	d or significant cultu	ıral events:			
Are there any rece sibling etc.?	nt traumatic situatio	ons the child has bee	en exposed to such a	as a death in the fam	ily, divorce, new
Are there other sib If yes, please list na	olings/ family in the ame(s) and age(s).	nome? 🗆 Yes 🕒 N	0		
Previous Care Situa	ation				
	cicipated in a group of deare center or a far	• .	sly? 🗖 Yes 🗖 No		
Do you have back t	up care arranged in	case of illness or cer	nter closure? 🔲 Ye	s 🗖 No	
Sleep Habits					
Does your child sle	ep through the nigh	t? ☐ Yes ☐ No			
Does your child sle	ep in a bed, crib, or	other?			
Do you swaddle yo	our child to sleep?	Yes 🗖 No			
Does your child sle	ep with a blanket o	other comfort item	1?		

Does your child nap? Yes No
If so, when, and how often?
What time does your shild typically go to had at night and awaken in the marning?
What time does your child typically go to bed at night and awaken in the morning?
Dietary Routines
Are there any dietary food restrictions? \(\begin{align*} \Pi \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
If yes, please explain.
What is your child's favorite food?
What food does your child dislike?
Can your child self-feed?
Does your child use silverware, sippy cup, open cup drink through a straw?
Does your child use (Check all that apply):
☐ silverware ☐ sippy cup ☐ open cup ☐ drink through a straw ☐ Other
If other, please explain:
Does your child still use a highchair to eat? ☐ Yes ☐ No
Toilet Training
Can your child be relied upon to indicate bathroom wishes?
What words does your child use for:
Bowel movements: Urination:
bower movements. Offilation.
What do you call their private parts?
what do you can then private parts:
Disposition/ Home Discipline
What are your child's strengths?
My child feels confident when
My Child is afraid of
My child gets frustrated when
Miles and the state of the first
When my child gets upset, she/ he
What is your normal method of dissipline?
What is your normal method of discipline?

What is your child's temperament? Are they easy going, hard to please, demanding, aggressive, etc.
Does your child have any fears we should be aware of?
Are there any other comments or information you would like the center to know?
Any specific concerns?
Academic Environment
Has your child had experience playing with other children?
Does your child have any security objects such as a blanket, pacifier, bottle, toy etc.?
How do you sooth your child or how does your child self soothe?
What are your child's favorite activities, toys, books, or games?
In most cases, when opportunities arise to make choices, your child prefers to:
In most cases, your child prefers situations that offer:
In most cases, your child prefers temperatures which are:
In most cases, your child prefers lighting which is:
In most cases, your child prefers environments where there is:
Most of the time, your child prefers to be:
Most of the time, your child prefers to be involved in:
Most of the time, your child prefers environments that are:
What are your child's physical capabilities? IE. Sitting, crawling, running, cartwheels, etc.

If you can think of any other particular preferences that your child may have regarding environmental conditions, likes and dislikes, etc., please list them below.
Expectations
What goals do you have for your child in school this year?
What expectations do you have for us, your child's teachers?
What is your preferred method of communication with your child's teacher?



Go Digital to Increase Registration Completions

Now that you know what to include in your enrollment packet, get ChildcareFORMS to make the entire process digital.

- **Increase the number of families completing registration** by making the experience digital, convenient, and mobile.
- Reduce incomplete forms and errors with an industry-standard online enrollment packet including required fields.
- **Save time** spent reviewing paper packets, chasing down paperwork, and following up after registration.



Industry-Standard Digital Enrollment Packet



Completed Packets Available in ChildcareCRM



Necessary State Forms



Parent E-Signature



Flexibility to Remove Sections, Questions, State Forms



Pre-Filled Form Fields



Branded Login Page



Automated Enrollment Communications

ChildcareCRM is the leading provider of cloud-based CRM software that helps childcare organizations grow their business by boosting enrollment and saving time. More than 4,000 childcare centers across the world rely on ChildcareCRM to automate sales and marketing so their staff can focus on what matters most—caring for their enrolled families. The ChildcareCRM platform includes lead management, sales and marketing automation, analytics, and online family enrollment. ChildcareCRM supports customers of all sizes from single centers to multinational enterprises.

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