Childcare Registration Form

Date: _____
month/day/year

1st Child's First Name: _____**Last Name:** _____

Date of Birth: _____ **Gender:** ☐ Male ☐ Female **Grade:** _____
month/day/year

2nd Child's First Name: _____**Last Name:** _____

Date of Birth: _____ **Gender:** ☐ Male ☐ Female **Grade:** _____
month/day/year

3rd Child's First Name: _____**Last Name:** _____

Date of Birth: _____ **Gender:** ☐ Male ☐ Female **Grade:** _____
month/day/year

Parent's First Name: _____**Last Name:** _____ ☐ Mother ☐ Father

Phone number: (__ __ __) __ __ __ - __ __ __ ☐ Text ☐ WhatsApp ☐ Phone Call

Address: _____
(Street)

_____ _____ _____
(City) (State) (Zip Code)

Nationality/Country: _____ **Language(s) Spoken:** _____

Guardian Information if someone different from the parents will drop the child off:

Guardian's First Name: _____ **Last Name:** _____

Relationship to the child (grandparent, sister, brother etc.) _____

Phone number: (__ __ __) __ __ __ - __ __ __ ☐ Text ☐ WhatsApp ☐ Phone Call

Address: _____
(Street)

_____ _____ _____
(City) (State) (Zip Code)

Child	Age	Does your child speak some English? Circle your answer.
1		YES NO
2		YES NO
3		YES NO
4		YES NO

1. Please list any English-speaking programs that your child has been enrolled in such as a preschool, Head Start, Early Intervention, library programs, etc.

_____

2. How long has your child **lived in the U.S.**? **Circle** your answer.

   a) 0-3 months
   b) 4-6 months
   c) 7-12 months
   d) 1-2 years
   e) 3-5 years

5. Does your child have the opportunity to interact with English-speaking people inside your home? **Circle** your answer. **YES** or **NO**

6. Does your child have the opportunity to interact with English-speaking people in the local community? **Circle** your answer. **YES** or **NO**