



*Education Station  
Academy*

**Enrollment Form**

Start Date \_\_\_\_\_

**Child Information**  
**Child**

Last Name	First	Middle	Name Child Is Called	Sex __M __F
Street Address			Birth Date / /	Age
City	State	Zip	Home Number ( )	

**Parent Information**

**Mother**

Last Name	First	Middle	Home Number ( )	
Street Address			Drivers License Number	
City	State	Zip	Birthdate / /	
Mother's Place of Employment	Work Hours	S.S.# / /	Cell Phone Number ( )	
Employment Address		City	E-mail Address	

**Father**

Last Name	First	Home Phone Number		
Street Address			Drivers License Number	
City	State	Zip	Birthday / /	
Father's Place of Employment	Work Hours	S.S.# / /	Cell Phone Number ( )	
Employment Address		City	E-mail Address	

**Authorizations**

**Persons authorized to pick up or contact in case of Emergency**

Last Name	First	Home Number ( )		
Driver's License Number	Cell Phone Number		Work Number ( )	
Last Name	First	Home Number ( )		
Driver's License Number	Cell Phone Number		Work Number ( )	

**Public School Information**

Name of School		Address	Phone
Grade Level	Teacher	Transportation (Circle one or both) A.M. P.M.	

**Authorizations (Emergency Medical Care)**

Doctor	Address	Phone
Hospital	Address	Phone
Dentist	Address	Phone

I hereby authorize the Education Station, LLC to take my child to the above named physician or medical facility for treatment in the event of an emergency in which neither parent can be reached

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

I hereby authorize any licensed physician or medical treatment center to treat my child in case of an emergency in which the above named physician cannot respond.

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

I hereby authorize the Education Station, LLC to transport my child to or from school, on educational excursions, or on other center sponsored activities.

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

I hereby authorize the Education Station, LLC to include my child in supervised water activities.

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

Please list any allergies that your child has: \_\_\_\_\_

Child daycare operations are public accomodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) - 514-0301 (voice) or (800) - 514-0383 (TTY)

I acknowledge receipt of and have read the Parents Hand Book of Educatin Station, LLC. I have discussed any questions with the Director and fully understand the policies there in.

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

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_