

# Childcare Application

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608-638-2014 or 618-363 -7896

Child's Name: Boy Girl

Date of Birth:

Mother's Name and Address

Mother's Occupation and hours of work:

Home Phone: Business Phone:

Father's Name and Address:

Father's Occupation and hours of work:

Home Phone: Business Phone:

Person who may be called to pick up your child if you cannot be reached:

Name:

Phone#:

Address:

Who is your child's physician:

Physician's Phone:

## MEDICAL CONSENT

I give my permission for emergency medical treatment to be sought, if am unable to be reached first.

Parent Signatures:

I give my permission for my child to participate in all planned activities, including outside play and walks through the neighborhood.

Parent Signatures:

I understand that I am responsible for providing all outside wear required for each day depending on weather. In winter time a coat, hat, mittens, scarf and snowpants will be required. Children should always have an appropriate hat for each season and long sleeve shirts in the winter months. I will also provide 2 full sets of clothing change at all times. I will provide sleeping bag and a small pillow for rest time.

Parent Signatures:

Information about your Child

How would you describe your child's personality?

What activities does your child enjoy?

Has he/she attended childcare before? If so, where?

Please describe your bedtime routine?

Does your child nap? If so when and for how long generally?

Please list names and ages of all children in family?

How much television/media dose your child engage in? What types of programs?

Does your child listen to music in your home? If so what type?

Please describe your child's diet? Are there any special nutritional needs?

Does your child have playmates?

Has your child had any accidents, childhood illnesses, injuries, allergies or surgeries?

Please describe your child's likes, dislikes or fears?

Has your child had any accidents, childhood illnesses, injuries, allergies or surgeries?

Please provide a biography of your child and any information that you would like me to know about your child. You may include a biography of the birth and milestones (crawling, walking, etc), family situation, special characteristics or behavioral and medical concerns.