

Child's name _____ Birthdate _____

Address _____ Postal code _____

Parent/guardian name _____ Parent/guardian name _____

Address _____ Address _____

_____ Postal code _____ _____ Postal code _____

Home phone number _____ Home phone number _____

Work phone number _____ Work phone number _____

Alternate phone number _____ Alternate phone number _____

Emergency contact name (other than parent) _____

Phone number _____ Alternate phone _____

Physician's name _____ Phone number _____

To whom can the Day Home Provider release the child?

Immunization up-to-date yes no ► if no, reason _____

Note For the health and well-being of your child and others in the day home, it is necessary that immunizations be kept up-to-date. It is the parent's responsibility to ensure that this is done.

Please indicate any of the following illnesses your child may have had

- | | | |
|--|---|---|
| <input type="checkbox"/> asthma* | <input type="checkbox"/> bronchitis | <input type="checkbox"/> chicken pox |
| <input type="checkbox"/> chronic diarrhea | <input type="checkbox"/> colds (frequent) | <input type="checkbox"/> congenital abnormalities |
| <input type="checkbox"/> convulsions (without fever) | <input type="checkbox"/> convulsions (with fever) | <input type="checkbox"/> croup |
| <input type="checkbox"/> eczema* | <input type="checkbox"/> ear infections | <input type="checkbox"/> eyesight problems |
| <input type="checkbox"/> fractures | <input type="checkbox"/> hearing problems | <input type="checkbox"/> measles (German) |
| <input type="checkbox"/> measles (red) | <input type="checkbox"/> mumps | <input type="checkbox"/> operations |
| <input type="checkbox"/> pneumonia | <input type="checkbox"/> rheumatic fever | <input type="checkbox"/> scarlet fever |
| <input type="checkbox"/> tonsillitis | | |

* trigger _____

Allergies drug food other Please identify _____

Signature _____ Date _____

Collection and use of personal information

Personal information is collected in accordance with the *Municipal Government Act* and the *Alberta Children and Youth Services Act*. It is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act* and will be used to ensure that the Day Home Provider has the necessary information to provide a positive experience for your child. If you have any questions about the collection and use of the information, contact the Supervisor of Family Day Homes at 780-464-4044.