J-MAX & FRIENDS REGISTRATION

1.Parent(s)/Guardian(s) Information:

Full Name(s):
Address:
Phone Number(s):
Email Address:

2. Child's Information:

Child's Full Name:
Date of Birth:

3. Childcare Schedule:

Arrival Time:-- Pickup Time:--
Care Days:☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

4. Authorized Individuals for Emergency and/or Regular Pick up:

For the safety of all children, I _____authorize the individuals listed above to pick up my child. I understand that my child **will not be released** to anyone **not listed** unless I provide prior written or verbal consent. A valid photo ID will be required to confirm identity.

1. Name: _____
Relationship to Child: _____
Phone Number: _____

2. Name: _____
Relationship to Child: _____
Phone Number: _____

Parent's Signature: _____ **Date:**_____

Print Name: _____