

# Hilltop Children's Center

Director: Pooneh Jahadi (PJ) Yazdi, PhD

## Registration Form

Please PRINT clearly with blue or black ink. **This information is required by Texas Child Care Licensing.**  
Please fill the form COMPLETELY

❖ My child will start on \_\_\_\_\_ and will be in care at Hilltop Children's Center:

ON: \_\_ Mon \_\_ Tue \_\_ Wed \_\_ Thu \_\_ Fri

○ \_\_ Extended Day (6:30 AM – 6:00 PM) \_\_ Half Day (9 AM to 2:30 PM) \_\_ Modified Hrs: \_\_\_\_\_

○ \_\_ After-School Program (5 days a week) \_\_ Before School Care (bus pickup) \_\_ School Break Camp

Child's Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Sex: \_\_\_\_\_

Nickname: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address (if different than the child): \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Hours: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ carrier: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address (if different than the child): \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Hours: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ carrier: \_\_\_\_\_

❖ Parents are: Married \_\_ Living Together \_\_ Divorced \_\_ Separated \_\_ Widowed \_\_ Single \_\_

❖ Parent/Guardian with legal custody: \_\_\_\_\_

❖ Parent or Person Financially Responsible: \_\_\_\_\_

❖ Other Household Members:

Names: \_\_\_\_\_ Ages: \_\_\_\_\_ Relationships \_\_\_\_\_

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❖ Parent **NOT** authorized to pick up child:

Name: \_\_\_\_\_ Comment \_\_\_\_\_

*In order to be effective, I agree to provide a copy of the court order immediately to the school indicating that the named parent is not authorized to pick up the child.*

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How did you hear about HtCC? \_\_\_\_\_

Emergency Contacts (local person **OTHER THAN PARENTS OR GUARDIAN**, if parents cannot be reached)

I hereby authorize Hilltop Children's Center to allow my child to leave the childcare operation only with the following persons: (With prior notice from parent/guardian and proper ID only)

❖ Emergency Contact (**non-parent**) \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Address: \_\_\_\_\_

Best Contact Number: (\_\_\_\_) \_\_\_\_\_ Driver's License # \_\_\_\_\_

❖ Emergency Contact (**non-parent**) \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Address: \_\_\_\_\_

Best Contact Number: (\_\_\_\_) \_\_\_\_\_ Driver's License # \_\_\_\_\_

❖ Other Authorized People to Pick up the Child:

3) Name \_\_\_\_\_ Phone No \_\_\_\_\_ R: \_\_\_\_\_

4) Name \_\_\_\_\_ Phone No \_\_\_\_\_ R: \_\_\_\_\_

5) Name \_\_\_\_\_ Phone No \_\_\_\_\_ R: \_\_\_\_\_

❖ I hereby:  give  do not give consent for my child to **be transported** and supervised by Hilltop Children's Center employees:

for emergency care  on field trips  to and from school  to and from home

❖ I hereby:  give  do not give my consent for my child to **participate in Field Trips**.

❖ I hereby:  give  do not give my consent for my child to **participate in water Activities**:

Sprinkle Play  Splashing/Wading Pool  Swimming Pool  Water Table Play

❖ I hereby grant absolute right and permission to Hilltop Children's Center to **photograph/film** my child for purposes of Hilltop Children's Center advertisements, illustrations, literature, brochures, websites, and other business purposes. I understand that identifying information will not be released in any public publications or announcements. However, some identifying information, such as first name, may be realized for internal publications and announcements such as school newsletter. \_\_\_\_\_ (**initial**)

❖ Name of Previous Childcare: \_\_\_\_\_ Date of Attendance: \_\_\_\_\_

❖ School-age Children: Name of School \_\_\_\_\_ Grade: \_\_\_\_\_

**Persons signing contract are responsible for payment:**

*I understand this is a legally binding contract, and I have read it and understand it. I have received a copy of Hilltop Children's Center Parent Handbook.*

Parent/Guardian (Mother) \_\_\_\_\_ Parent/Guardian (Father) \_\_\_\_\_