

Member No: _____
Initial visit: _____

Registration Paid \$ _____
Cash Check C/C
Date: _____
Entered by: _____



Registration Form

How did you hear about us? _____

Parent/Guardian Information:

Parent #1 _____ Driver License# _____ Password _____
Address _____ City _____ St _____ Zip _____
Home Ph _____ Cell Ph _____ Work Ph _____
E-Mail Address _____ Would you like to receive our monthly calendar via e-mail? YES NO

Parent #2 _____ Driver License# _____ Password _____
Address _____ City _____ St _____ Zip _____
Home Ph _____ Cell Ph _____ Work Ph _____

Child Information:

Name of each Child	Birth Date	Sex	Hygiene	Food or Medical Allergy	Take medications	Asthma	Speech/Comm. Difficulty	Usually takes a nap	Date of last physical exam
(List last name, if different)			(Circle one)						
1.		M/F	Diaper Training Trained	Y N	Y N	Y N	Y N	Y N	
2.		M/F	Diaper Training Trained	Y N	Y N	Y N	Y N	Y N	
3.		M/F	Diaper Training Trained	Y N	Y N	Y N	Y N	Y N	
4.		M/F	Diaper Training Trained	Y N	Y N	Y N	Y N	Y N	
5.		M/F	Diaper Training Trained	Y N	Y N	Y N	Y N	Y N	

Please explain any **YES** answers from above and any additional information, such as any continuous, long term prescriptions, serious injuries, illnesses, hospitalizations or any other information our staff should have:

In the event of an emergency and I am unable to be reached, I authorize the following persons, other than parents, to pick up my child/children or be contacted for information:

Name Relationship to Child Address Phone Number

Name Relationship to Child Address Phone Number

Emergency Medical Contacts and Consent for Medical Treatment:

In the event I cannot be reached, I, or whoever signs my child in for that day (Authorized Representative to act as an agent for me), authorize Adventure Kids Playcare (AKP) to provide basic first aid to my child as required. In the event that AKP, in its sole discretion, believes that my child needs more advanced care, I consent to dental, medical, surgical, and/or hospital care, treatment, and/or procedures to be performed for my child by a licensed dentist, physician, ambulance attendant/emergency medical technician, or other licensed health care provider (collectively, "Health Care Professional") associated with a licensed treatment facility when deemed necessary or advisable by the Health Care Professional to safeguard my child's health. I waive my right of informed consent to such treatment. I also give my permission for my child to be transported by ambulance or AKP to an emergency center for treatment. I certify my child is in excellent health and physical condition and has no medical, psychological, physical or mental condition which has not been disclosed to AKP on the registration form. My child (ren) do not have any infectious, contagious or communicable diseases.

In the event my child is in need of emergency care, I do not require that the following physician or hospital be contacted. The information provided below is for informational purposes only. I consent to my child being taken to the treatment facility recommended by the Health Care Professional attending my child.

Name of Physician	Office Address	Phone Number
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Name of Dentist	Office Address	Phone Number
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Name of Hospital	Address	Phone Number
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Parent Signature	Date
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Adventure Kids Playcare (AKP) is regulated by Family Protective Services. The minimum standards policies for child care centers and our inspection reports are available for review. We maintain an open door policy. Parents may visit and observe our center at any time. A manager or director is always available to discuss any concerns about the policies and procedures. If a parent would like to stay in the center with their child, we must have a completed criminal background check on file.

I, on behalf of myself, my spouse, and each child designated on the registration form (my "child"), hereby waive and release all rights, causes of action and claims AKP, a Texas Corporation and Mecum Childcare, LLC, a Washington corporation, their Officers, Directors, Agents, and Employees, for any loss, expense, damage or injury suffered by my child during the time my child is visiting AKP, including the possible negligence of AKP, but excluding gross negligence and intentional misconduct. I understand that the provision of child care contains risk of injury to persons and damage to property, and that by signing this release I engage AKP to provide temporary childcare for my children at my own risk. I have been given an opportunity to inspect the premises of AKP and found that it is safe and satisfactory for my child. I also have been given the opportunity to ask questions and obtain answers to my satisfaction regarding any and all aspects of AKP and this Release. By signing this Release, I have not relied on any promises or statements made by AKP or its employees other than those contained in written information supplied to me by AKP. I understand this Release will be kept on file at AKP and will continue in effect for this and any future visits my Child may make to AKP.

I have read the above carefully and fully understand the content and consequences of this agreement and agree to abide by and be bound by the above policies and procedures and release.

Parent Signature	Date
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Adventure Kids Playcare Parent Policy and Release Form

- Adventure Kids Playcare (AKP) must have a completed registration, parent policy and release form before enrollment. If children are not enrolled in a school, parents must also complete a parent's health statement or physician health statement form (a copy of the immunization records with a physician's health statement and physician's signature may be provided in place of the physicians health statement form) before the second visit. All children must be current on appropriate immunizations, vision and hearing screen requirements, and tuberculosis testing in order to be admitted to our center. We must have an updated immunization record or physician health statement form each year until the child enters school.
- Initial registration fee is \$40 per family. It is due on the first visit and is non-refundable. Renewal registration is \$40 per family and due on each family anniversary date. Families can visit as non-members without paying the registration fee for their first visit. The non-member fee is an additional \$2.00 per hour per child.
- The costs per child are: infants (up to 18 months, for each infant) \$12.00 per hour, child (over 18 months) \$9.50 per hour, each additional sibling (over 18 months) \$5.50 per hour. The costs are calculated to the minute. Costs may vary between AKP centers.
- Our hours: Monday -Thursday: 7:00am-10:00 pm, Friday: 7:00am-12:00 am, Saturday: 9:00am-12:00 am and we operate 12 months a year. Please make sure to arrive to pick up your children before our closing time. There will be a late fee of \$1.00 per minute after our closing time.
- Reservations are not required, but are recommended for infants at all times and for all other children on Friday and Saturday evenings. If you make a reservation and do not show or fail to cancel at least 30 minutes before your reservation time, you will be charged a \$5 fee.
- Please bring extra diapers and a change of clothes for your child. Please label all items with your child's first and last name. There will be a charge of \$1.00 for each diaper supplied by Adventure Kids.
- Meals are served at 8:00 a.m., 11:30 a.m., and 5:30 p.m... Meals can be purchased for \$4.00 per child, or brought from home. If meals are brought into the center by the parent, the parent understands that Adventure Kids is not responsible for the nutritional value or meeting the child's daily food needs. If a child's stay lasts during a meal time, and they are not signed up for a meal, we will feed them and add the meal cost to the bill. Meals may be brought from home, but please do not bring any food item that contains peanut products. Snacks are served at 10:00 a.m., 3:00 p.m., and 8:00 p.m. and consist of crackers and juice.
- We have a peanut-free policy at all of our centers and do everything we can to make sure it remains safe for all children. If food containing peanut products is brought into the center, we will dispose of the food and provide the child with one of our meals. But, there are situations that are out of our control where a child may have had food containing peanut butter before coming into the center. If your child has severe food allergies, we cannot guarantee that they will not have a reaction while at our center.
- AKP cannot accept children who are ill. Children must be fever-free and symptom-free for at least 24 hours before visiting AKP. We cannot administer any medication or routine medical procedures (i.e. inhalers, nebulizers). If your child is dropped off ill, we will call you to come pick them up.
- AKP does not discriminate against any person with physical, mental or sensory disabilities. However, our services do not include one-on-one supervision, therefore, we cannot accept children whose special needs require that we provide one-on-one supervision.
- Please be sure to update emergency contact phone numbers with our staff. In the event of a medical emergency, we will phone the parent immediately and call 911. If parents are not available, we will contact the emergency contacts.
- Only parents will be allowed to check children in and out of AKP. Parents must show their membership card & photo id upon arrival. Authorized persons will be able to check children in/out if prior arrangements are made with AKP and the parent has completed an Alternate Release Form.
- Only socks are to be worn into the play area for safety and cleanliness.
- We only use positive methods of discipline and guidance that encourage self-esteem, which include praise of good behavior, reminding children of behavior expectations, redirection and brief supervised separation or time-out from the group (located in the front office), when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age. No corporal punishment, physical or verbal abuse, abusive language, or withdrawal of food, naps, or toilet training of any kind is allowed on the premises by anyone, including parents. For the safety of all, children that show repeated misbehavior or biting will be asked to take a two-week respite from AKP.
- Payment for AKP services will be due at the time of each check out.
- Family Savings Plans (Pre-Pay) cannot be transferred between locations. It can only be used at the originating location. Family Savings Plans cannot be used to pay for registration fees, Mom's Day Out, or any other discount program and are not refundable.
- Policy changes will be made in writing as needed and provided to all parents. Parents may be contacted by phone as needed for information needed in regard to their children.
- Children will not be released to a parent or any other person who is under the influence of drugs or alcohol.
- The staff of AKP is required by law to report any instance where there is reason to suspect the occurrence of physical, sexual, or emotional child abuse, child neglect or exploitation to the police or Child Protective Services. Notification of the parents is solely dependent upon the recommendation of the police or Child Protective Services.
- AKP has a Disaster policy in place and all staff has been trained on the procedures; the policy is available for review in our office.
- AKP does not discriminate on the basis of gender, race, color, creed, religion, sexual orientation, gender identity, or national origin. However, we reserve the right to refuse service to any person or persons for legitimate business reasons, such as maintaining the safety of our facility and the children in our care.
- **I hereby grant AKP permission to use photographs/video of my child (ren), taken during their stay at AKP, to be used solely for the purposes of AKP promotional material, website, and publications. I will make no monetary or other claim against AKP for the use of the photographs/video.**

I have read the above carefully and fully understand the content and consequences of this agreement and agree to abide by and be bound by the above policies and procedures and release.

Parent Signature

Date