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**OFFICE USE ONLY**

**Admission Date: \_\_\_\_\_\_\_\_\_\_ Discharged Date: \_\_\_\_\_\_\_\_\_\_**

**Application for Child Care**

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| --- | --- |
| **Name of Child:** Click or tap here to enter text. | **Address**: Click or tap here to enter text. |
| **Birthdate**(dd/mm/yy): Click or tap here to enter text. | **City**:Click or tap here to enter text. |
| **Date of Application**(dd/mm/yy): Click or tap here to enter text. | **Postal Code**:Click or tap here to enter text. |
| **Date of Care Requested**(dd/mm/yy): Click or tap here to enter text. | **Subsidized care**:   Yes  [ ]   No [ ]  |

**Days Requested:** Monday- Friday (Full Time): [ ]  Part Time: [ ]  Part time days requested: M/W/F [ ]  or T/TH  [ ]

**Affiliation with McMaster University:** Undergrad:[ ]  Graduate Student: [ ]  Faculty/Staff: [ ]  Community Member: [ ]

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| --- | --- |
| **Parent/Guardian Name:** Click or tap here to enter text. | **Relationship to Child:** Click or tap here to enter text. |
| **Home Phone #**: Click or tap here to enter text. | **Cell #**: Click or tap here to enter text. |
| **Work** # : Click or tap here to enter text. | **Emai**l: Click or tap here to enter text. |
| **Address**: Click or tap here to enter text. |   |

|  |  |
| --- | --- |
| **Parent/Guardian Name:** Click or tap here to enter text. | **Relationship to Child:** Click or tap here to enter text. |
| **Home Phone #**: Click or tap here to enter text. | **Cell #**: Click or tap here to enter text. |
| **Work** # : Click or tap here to enter text. | **Emai**l: Click or tap here to enter text. |
| **Address**: Click or tap here to enter text. |   |

**Please provide an emergency contact if both parents/guardians cannot be reached:**

**Allergies/Food Restrictions/Medical Concerns:**  Click or tap here to enter text.

|  |  |
| --- | --- |
| **Name:** Click or tap here to enter text. | **Relationship to Child:** Click or tap here to enter text. |
| **Home Phone #**: Click or tap here to enter text. | **Cell #**: Click or tap here to enter text. |
| **Work** # : Click or tap here to enter text. | **Emai**l: Click or tap here to enter text. |

**Parent/Guardian Signature:** Click or tap here to enter text. **Date:** Click or tap here to enter text.