

Tiger Den Registration

Please check one or both childcare options

☐ Morning Tiger Den

6:30 am – 8:40 am

☐ After School Tiger Den

4:00 pm - 6:00 pm

Child's Name _____ Grade _____ D.O.B _____

Address _____ City _____

Mother's Name _____ Email _____

Cell Phone # _____ Work # _____

Address _____ City _____
(if different than child)

Father's Name _____ Email _____

Cell Phone # _____ Work # _____

Address _____ City _____
(if different than child)

Emergency Contact

Name: _____ Relationship to child: _____

Phone Number: _____ Alt. phone #: _____

Medical Information

Doctor: _____ Phone #: _____

Allergies: _____

Medication: _____

Special Needs - including diet: _____

Days of Program attendance: (\$5 per hour, no required minimum)

Days of attendance: Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___

Time of drop-off: 6:30am ___ 7:00am ___ 7:30am ___ 8:00am ___ Notes: _____

Time of pick-up: 4:30pm ___ 5:00pm ___ 5:30pm ___ 6:00pm ___ Notes: _____

Please sign this form acknowledging you have read the Tiger Den handbook and agree to comply.

Parent Signature

Date