

Friends Day Care – Application for Enrollment

Child's Full Name: _____

Date of Birth (dd/mm/yyyy): _____

Home Address: _____

City: _____ Post Code: _____

Parent/Guardian #1 Name: _____

Home Address (if different to above): _____

Home or Cell Number: _____ Work or other Telephone: _____

Email Address: _____

Work or School Name/Address: _____

Parent/Guardian #2 Name: _____

Home Address (if different to above): _____

Home or Cell Phone: _____ Work or other Phone: _____

Email Address: _____

Work or School Name/Address: _____

See over



How did you hear about us?

Friend/family _____

Facebook _____

Flyer _____

Yelp _____

Website _____

Toronto Children's Services _____

Google Search _____

Other _____

The information gathered in this document is strictly for the use of Friends Day Care administrative staff. All information will be kept confidential in your child's file. From time to time, it may be viewed by officials of the Ministry of Education or Toronto Children's Services. They may check to see if we have collected all the necessary information, and are part of routine checks for daycare centres. You will be notified in writing, should your child's file be selected for review. At no other time will information be shared with another party, without your prior consent.

I have read and understand the privacy statement above:

Parent/Guardian Signature: _____

Date: _____

OFFICE USE ONLY:

FF SUB NUR

Follow up:

Preferred start date:

Space offered:

Start Date:

Deposit Paid: