



## FERN GULLY FOREST SCHOOL ENROLLMENT FORM

Date \_\_\_\_\_

**Registration for (check all that apply):**

Nature Creativity 9 am – 1 pm: Mondays \_\_\_\_\_ Tuesdays \_\_\_\_\_ Fridays \_\_\_\_\_

Wild Ones 9 am – 1pm (Wed) \_\_\_\_\_ Yoga & Expressive Arts 9 am – 1pm (Thur) \_\_\_\_\_

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Birthday \_\_\_\_\_ Nickname \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

**Contact Info:**

Parents/Guardians

\_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Work phone and times at work or special instruction for contacting you

\_\_\_\_\_  
\_\_\_\_\_

**Service Details**

Beginning date and times needing care: \_\_\_\_\_

Signature of Parent/Guardian

Date

# Your Child's Health Record

General state of health:

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Doctor's name \_\_\_\_\_

Doctor's phone number \_\_\_\_\_

Does your child have any known allergies?

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Are you concerned that your child may be sensitive to certain foods or do they have food restrictions? \_\_\_\_\_

If yes, please describe:

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Special instructions for eating (i.e., please feed protein before snacks, etc.):

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Does your child have any medical conditions which I should be made aware of?

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Does your child have any speech, hearing or visual problems?

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Would there be any restrictions to play or activities?

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Does your child have appropriate gear, including water-proof suit, boots, gloves & warm clothes? \_\_\_\_\_

## About Your Child

Are there any recent traumatic situations the child has been exposed to such as a death in the family, divorce, new sibling etc.?

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What is your child's temperament? Are they easy going, hard to please, demanding, aggressive, etc.

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Can your child be relied upon to indicate bathroom wishes and are there any special instructions or things we should know about for potty time? \_\_\_\_\_

Are there any other comments or health information you would like to let us know about?

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## Emergency Contact and Additional Information

Emergency Contact Name & Relationship (not parent) \_\_\_\_\_

Phone \_\_\_\_\_

Emergency Contact Name & Relationship (not parent) \_\_\_\_\_

Phone \_\_\_\_\_

Special notes regarding your child:

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