

 **GRACE KIDS CHILD REGISTRATION**

For the Safety and security of all the children placed in our care, we would like some essential information about your child. If there is any other information you feel we should have about them or if you have questions about our programs, please contact the Grace Kid’s Director or speak with someone at the Child Check-in Desk.

Only Parent(s) or designated alternate caregiver(s) listed on this form will be allowed to pick up your child and/or take them to the bathroom.

Note: there is room to add additional children’s name and information on the other side.

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| --- | --- |
| **Child’s Name** |  |
| **Birthdate** |  |
| **Allergies** |  |
| Any medical conditions or accommodations to be made to ensure optimum care for your child |  |
| Contact information for Parent(1):Name:Cell(s):Email: |  |
| Contact information for Parent (2):Name:Cell(s):Email: |  |
| Contact information for alternate caregiver (3):Name:Cell(s):Email: |  |
| Signature of Parent giving permission for Grace Kids, Saskatoon volunteers to care for child(ren) following the guidelines published in the Grace Kids Handbook. |  |
| ADDITIONAL CHILDREN |  |
| **Child’s Name** |  |
| **Birthdate** |  |
| **Allergies** |  |
| Any medical conditions or accommodations to be made to ensure optimum care for your child |  |
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