



**Mountain Laurel Montessori School**  
 155 Biggs Drive, Front Royal, VA 22630  
**Child Registration Form**

*All fields below MUST be completed*

<b>Office Use:</b>
Teacher _____
Summer Camp <input type="checkbox"/>

Child	Nickname	Date of Birth	Gender
Program	Grade	Age	

**PARENT(S)/GUARDIAN(S)**

Parent	Parent
Home Address	Home Address
Home Phone	Home Phone
Cell Phone	Cell Phone
Place of Employment	Place of Employment
Business Phone	Business Phone
Email Address	Email Address

**MEDICAL INFORMATION**

Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations Needed	None <input type="checkbox"/>
Allergies or Intolerance to Food, Medication, Etc., and Action to Take in an Emergency	
Child's Physician	Phone

**HOLD HARMLESS AND INDEMNITY AGREEMENT**

The undersigned, on behalf of themselves, their spouses (as the case may be), their representatives, heirs, successors and assigns hereby (1) authorizes the persons identified below to transport and remove the child/children identified above to and from the premises of Mountain Laurel Montessori School from time to time, and (2) agrees to indemnify and hold harmless Mountain Laurel Montessori School, its employees, agents, contractors and students, from and against any and all actions, causes of actions, costs, damages, claims, and liabilities of any nature whatsoever arising from or related to the transport and removal of the child/children identified above by the individuals identified below or which may otherwise occur while the child/children is/are in the care, custody, and control of the individuals identified below.

*Effective: November 1, 2020, in the Commonwealth of Virginia*

*List two people to contact if parent(s) cannot be reached. Contacts must be located within a 30 mile radius of the school.*

Name of Emergency Contact	Address	Phone
1.		
2.		

List all other adults who may also pick up your child.

1.	2.	3.
4.	5.	6.

**AGREEMENTS**

- Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.
- NOTE: Section 22.1-4.3 of the Code of Virginia states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.
- The child day center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill, and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
- The parent(s)/guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately. \*
- The parent(s)/guardians agree to inform the center within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.

\_\_\_\_\_

**Parent(s) or Guardian(s)**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Parent(s) or Guardian(s)**

\_\_\_\_\_

**Date**

\* If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardians(s) that states the objection and the reason for the objection.

**OFFICE USE ONLY  
IDENTITY VERIFICATION**

Proof of identity is required. A copy is not kept on file.

<b>Place of Birth</b>	<b>Birth Date</b>	<b>Birth Certificate Number</b>	<b>Date Issued</b>
<b>Other Form of Proof</b>		<b>Date Documentation Viewed</b>	<b>Person Viewing Documentation</b>

Date of Notification of Local Law-Enforcement Agency (when required proof of identity is not provided): \_\_\_\_\_

*Date*

Proof of the child’s identity and age may include a certified copy of the child’s birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child’s identity from a child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal or his designee of a public school in the U. S. that a certified copy of the child’s birth record was previously presented or copy of the entrustment agreement conferring temporary legal custody of a child to an independent foster parent. Viewing the child’s proof of identity is not necessary when the child attends a public school in Virginia *and* the center assumes responsibility for the child directly from the school (i.e., after school program) or the center transfers responsibility of the child directly to the school (i.e., before school program). While programs are not required to keep the proof of the child’s identity, documentation of viewing this information must be maintained for each child.

Section 63.2-1809 of the Code of Virginia states that the proof of identity, if reproduced or retained by the child day program or both, shall be destroyed upon the conclusion of the requisite period of retention. The procedures for the disposal, physical destruction, or other disposition of the proof of identity containing social security numbers shall include all reasonable steps to destroy such documents by (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means.

**032-05-252/11 (06/05)**