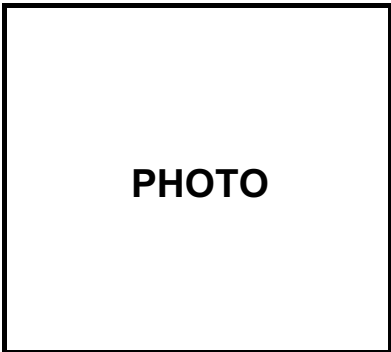


ROGERS-PIERCE CHILDREN'S CENTER

75 Pleasant Street, Arlington, MA 02474
Tel. (781)646-5280 FAX (781)646-5295

GROUP DAY CARE AND SCHOOL AGE CHILDCARE CHILD'S FACE SHEET / ENROLLMENT FORM



CHILD'S INFORMATION:

Name _____
Address _____
Phone # _____
Eye Color _____ Hair Color _____
Height _____ Weight _____
D.O.B. _____ Ethnic Group _____
Identifying Marks _____

PARENT/GUARDIAN INFORMATION

Name _____
Address _____
Phone # _____
Cell Phone # _____
E-mail Address _____
Other # _____

Occupation _____
Business Name _____
Business Address _____

Business Phone _____

Name _____
Address _____
Phone # _____
Cell Phone # _____
E-Mail Address _____
Other # _____

Occupation _____
Business Name _____
Business Address _____

Business Phone _____

I certify that documentation of physical examination and immunizations in accordance with public school health requirement, and lead poisoning screening in accordance with public health requirements are on file at my child's school.

Parent / Guardian Signature

Date

Parent / Guardian Signature

Date