

Registration form for placement at a day-care center

Legal guardians

	Parent / Person 1	Parent / Person 2
Surname	<input type="text"/>	<input type="text"/>
First name	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
City, Postal code	<input type="text"/>	<input type="text"/>
Phone (mobile)	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>
Joint custody	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you receiving support from social services?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, contact person at the social welfare office (name, email, telephone number):		
<input type="text"/>		
Emergency contact if parents can't be reached: <input type="text"/>		

Child

Surname	<input type="text"/>
First name	<input type="text"/>
Date of birth	<input type="text"/>
Paediatrician	<input type="text"/>
Health insurance	<input type="text"/>
Liability insurance	<input type="text"/>
Allergies	<input type="text"/>
Comments	<input type="text"/>

Day-care center	<input type="text"/>
Desired childcare days	<input type="text"/>
Desired start date	<input type="text"/>

- We apply for a subsidy for the day-care place and enclose the subsidy confirmation or send it to VKKA no later than 10 days after the child's admission.
- We do not receive any subsidies for the day-care place and pay the rate specified in the childcare contract.
- We confirm that we have received the care guidelines and agree with all points.

Place, Date:

Siganture: