2026–2027 SCHOOL YEAR

Child Enrollment Form

Oregon licensing requires this information before your child's first day of care. Please complete all three pages; required fields are marked *.



Child

Legal first name *

Legal last name *

Date of birth *

Preferred name

Enrollment start date *

Street address *

Apt or unit

City *

State *

ZIP code *

Home language(s)

School and grade if enrolled

School phone if enrolled



Parent or guardian 1

First name *

Last name *

Relationship to child *

Phone *

Email *

Home address if different from child

Employer or school, address and phone * or "none"







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Contacts and Authorized Pickup

Parent or guardian 2

Complete if a second parent or legal guardian shares custody or care.

First name | Last name | Relationship to child

Phone | Email

Home address — if different from child | Employer or school, address and phone

Custody arrangements or legal restrictions — please attach court documents

Emergency contacts and authorized pickup

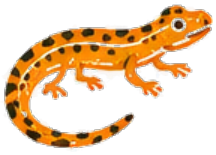
List at least one emergency contact other than a parent or guardian. A contact may pick up your child only if Pickup is marked Yes.

First name *	Last name *	Relationship *	Phone *	Emergency	Pickup

First row required. Mark Emergency and Pickup Yes or No for each person.

Photo identification is required for anyone not known to our staff. Changes to this list must be provided in writing before pickup.





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Health and Care Information

Health

Medical provider or emergency care facility — if known

Phone — if known

Allergies, reactions and required response * — or "none"

Current medications * — or "none"

Health or developmental concerns that may affect care — attach care plan if applicable

About your child

Routines, comfort strategies, interests, and family or cultural information you would like us to know — optional

I certify that this information is accurate and complete, and I will notify Moss & Mud promptly of any changes.

Parent or guardian signature *

Date *





