

Child Care Centre Les P'tits Lutins
Promenade de Tovière
Lieu-dit Le Rosset
73320 TIGNES
0457373111
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CHILD CARE CENTRE-REGISTRATION FORM

Children from the age of 15 month to 6 years

ATTENDING WEEK FROM **TO.....**

Surname and name of the **child** :

Date of birth:

Sex:

Surname and name of the **legal representatives:**

Home address:

Holiday home address (in the resort):

Contact details:

Phone number(s):

Email address:

CHILD CARE OPTIONS

Option n°1

Full day 8.45 am - 5.15 pm = 70 euros

5 days = 330 euros

6 days = 390 euros

Option n°2

Half day, **meal not included** (8.45am-12.00pm or 2.15 pm-5.15pm) = 40 euros

Option n °3

Morning with a **meal included** (8.45 am-2.00 pm) = 55 euros

Option n °4 (children 3-6 years) taking part in a group/private lessons ski/snowboard with ski school

Half day « morning + meal » or « meal + afternoon » child care + taken to their ski school lesson = 60 euros

5 days = 290 euros

6 days = 350 euros

In order to insure a high quality greeting of the children and for us to do the best we possibly can, please ensure that dropping off and collecting times are respected as followed:

- drop off **any time between** 8.45am and 10am
- collect **at the latest** 12.00 pm for children who do not have a meal with us
- collect **between** 1.30 pm and 2.00 pm (those with the option of morning child care + meal)
- collect **between** 4.00 pm and 5.15 pm

SELECTED OPTION

	FORMULE N°1	FORMULE N°2	FORMULE N°3	FORMULE N°4
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				

Weekly total:

The total amount is to be paid as and when you book (Chèque or cash)

NO CB

IBAN (International Bank Account Number) : FR76 1022 8046 1714 1365 0020 115

Medical information concernant your child

Child's health record booklet is to be presented when you arrive:

The compulsory vaccinations in order to be amongst others must be up to date in order for us to take on your child (Children born at the latest 31/12/2017: diphtheria, tetanus and polio)

· Is your child on medication?

If so, and the medication is to be taken in the day, please provide us with the most recent prescription and the corresponding medicine (any boxes must be labelled with the child's name as well as the prescription).

This also goes for any homeopathic medication. If the medication your child is on is with no prescription, please provide us with what the chemist prescribed (in order to know the correct dose to give, the frequency and the length of time).

· Does your child have any allergies?:

- Asthma:
- Medicine:
- Dietary:
- Others:

Indicate the cause of the allergy and how to best come about it:

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Indicate any other health issues, and how to best come about it:

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His/Her every habits:

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AUTORISATION

I (name)

- Allow any member of staff in case of an accident or faintness to :
 - contact the emergencies
 - have the child taken to the most adapted A&E and given the first necessary emergency aid.

The management team will at the same time inform the parent(s).

- In case of fever, my child can be given paracetamol YES NO

- My child can go on trips, and take various modes of transportation YES NO
- My child can be photographed and photos can be put up in the child care YES NO
- My child's photo can be used for advertising purposes: in the village, by the tourist office, by the child care's Facebook page, in brochures... YES NO
- Give permission to the people mentioned below to collect my child from childcare:

Surname/Name/Adress/ Telephone number (ID will be mandatory)

PARENT'S SIGNATURE

List of things to bring for your child:

- a complete change of clothes
- comfort blanket/toy, dummy
- slippers, just be more comfy
- outdoor clothes and footwear (gloves, bonnet, scarf and ski suit)
- sun cream
- sun glasses

PLEASE WRITE YOUR CHILD'S NAME ON EVERYTHING