



Foundation Learning Academy

7137 Queenston Blvd.

Houston, TX 77095

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ENROLLMENT INFORMATION

Child's Name: _____ Date of Birth: _____ Home Phone: _____

Date of Admission: _____ Starting Date: _____

Child's Address: _____

Mother's Name: _____ Home Phone: _____ Cell Phone: _____

Mother's E-Mail Address: _____

Mother's Address: _____

Place of Employment: _____

Work Phone: _____ Regular Working Hours _____

Father's Name: _____ Home Phone: _____ Cell Phone: _____

Father's E-Mail Address: _____

Father's Address: _____

Place of Employment: _____

Work Phone: _____ Regular Working Hours _____

Is the child living with: ☐ Mother? ☐ Father? ☐ Both Parents? ☐ Others?

Who has legal custody of the child? _____

Emergency Information:

Identify the adult(s) who is/are authorized to act for you in the event of an emergency. The Child(ren) may be released to the following:

Name: _____ Home Phone: _____ Cell Phone: _____

Full Address _____

Name: _____ Home Phone: _____ Cell Phone: _____

Full Address _____

Physician's Name: _____ Phone Number: _____

Full Address: _____

Transportation Plan:

To ensure the safety of your child, please list other adults to whom your child may be released or who are authorized to provide transportation for your child:

Name**Phone****Relationship To The Child****Check all that apply:**

I hereby ☐ give ☐ do not give consent for my child to participate in field trips.

I hereby ☐ give ☐ do not give consent to be photographed and/or videotaped, for use in Foundation Learning Academy websites, social media pages, publications and displays.

Emergency care: ☐ on field trips ☐ To and from school

School Age Children:

If the child(ren) are of school age, what school do they attend: _____ Phone Number: _____

☐ Yes my child's immunization record is on file at school, and all immunizations and tuberculosis test are current.

I hereby ☐ give ☐ do not give consent for my child to be transported to and from school on the Foundation Learning Academy School bus.

If my child is picked up after 6:30 pm, a \$1.00 per minute late fee will be assessed. If I have not picked up my child by 7:00 p.m. and all attempts to contact me, and all of my emergency contacts fail, Foundation Learning Academy will call the Police and State Agents.

The information stated above is current and adequate. I understand that it is my responsibility to notify the day care of any changes.

Parent/Guardian Signature

Parent/Guardian Signature