- Child Information and Registration Form

Halte-garderie les Marmottins

1. Child Information

Surname:

First name:

Date of birth: Age during the stay:

Child's usual home address:

Holiday address / second home:

2. Coordonnées des responsables légaux

Legal Guardian 1

Surname and first name:

Telephone:

Email:

Legal Guardian 2

Surname and first name:

Telephone:

Email:

During your stay, which telephone number should we use as the primary contact if needed?

Other people authorised to collect the child

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Name / First name Relationship to the child Telephone number

The child may only be collected by their parents or by people expressly authorised by the legal guardians.

3. Health and Specific Need

Does your child have:

☐ A chronic illness
☐ An allergy
☐ A disability or specific needs
☐ A history of seizures
☐ A condition or particular difficulty requiring specific attention
☐ None of the above

If yes, please provide details:

Is your child currently receiving any medical treatment?

☐ No
☐ Yes → Please specify the treatment and the circumstances in which it is required:

Any medical prescription required for your child's care must be provided to the childcare facility.

Individual Care Plan (PAI)

☐ No PAI
☐ PAI currently in place
☐ PAI to be set up

If your child has a PAI or requires specific medical care, please provide us with the necessary documents before your child's first day.

Child's weight: ..... kg
(Please provide this information when it is necessary for your child's medical care.)

If your child is receiving medical treatment, please provide a medical prescription.

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No medication will be administered without a prescription.

4. Your Child's Habits and Daily Routine

Meals :

Your child eats:

- Solid food or mixed food
- Independently or With assistance

Does your child follow a special diet?

☐ No
☐ Yes → Please specify:

Allergies or foods to be avoided:

Nappy changing / Toilet training

Is your child toilet trained?

☐ Yes
☐ No
☐ Currently learning

Does your child wear nappies?

☐ All day
☐ For naps only
☐ Other:

Sleep and Rest

Does your child usually sleep:

☐ In the morning
☐ In the afternoon
☐ In the morning and afternoon

Does your child use any of the following to settle to sleep?

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☐ A teddy / dummy
☐ A comforter / favourite soft toy
☐ Other:

Please provide any details or particular routines relating to your child's sleep:

➔ Please make sure that your child's comforter, pacifier and clothing are clearly labelled with their name.

5. Your child's usual Childcare Arrangements:

What is your child's usual childcare arrangement?

☐ Nursery / Daycare
☐ School
☐ Childminder
☐ Childcare at home
☐ Other:

Are there any particular habits, needs or information you would like to share with us to help us provide the best possible care for your child?

Documents to be provided :

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☐ Identity document for the legal guardian(s)
☐ Proof of the child's vaccinations
☐ Personal liability insurance certificate covering the child
☐ Medical certificate required for attendance in a childcare setting
☐ This completed and signed information form
☐ The childcare facility's Terms and Conditions, read and accepted
☐ PAI and any necessary medical documents, where applicable

Please send the required documents to:
creche@morzine-avoriaz.com

8. Practical information

Please provide your child with:

- a complete change of clothes suitable for the season;
- clothing suitable for outdoor activities;
- a sleeping bag, if your child uses one;
- their usual comforter and/or pacifier.

Where possible, your child's personal belongings should be clearly labelled with their name.

9. Déclarations et autorisations

I, the undersigned, ..., certify that the information provided in this form is accurate and agree to inform the childcare facility of any changes concerning my child's health or personal circumstances.

Care in the Event of an Accident or Emergency

I, the undersigned, ..., authorise the management and childcare professionals at The Marmottins to take the necessary measures in the event of an accident or health problem involving my child, including contacting the emergency services and, if necessary, arranging for my child to be examined or transported to a healthcare facility.

Any medical expenses incurred remain the responsibility of the child's legal guardians.

Terms and Conditions

I, the undersigned, ..., confirm that I have read and understood the Terms and Conditions of The Marmottins Tourist Childcare Facility and agree to comply with them.

Photography Consent

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I authorise The Marmottins Tourist Childcare Facility to photograph my child as part of the activities provided, for purposes strictly related to the children's care and intended for families, in accordance with the conditions set out in the Terms and Conditions.

☐ Yes
☐ No

Place: .....

Date: .....

Name and surname of legal guardian:
.....

Signature: