

# Child Care Registry Application - Teen

First Name	Last Name	Pronouns
City/Town	Postal Code	
Language(s) Spoken		
Personal Email Address	Youth Phone	Parent/Guardian Phone
Date of Birth	Present Age	

<b>Do you have any babysitting/child care experience?</b>		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Do you have experience babysitting children with special needs?</b>		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Do you have any of the following: (please provide copies)</b>		
Up-to-date CPR/First Aid training:	<input type="checkbox"/> Yes <input type="checkbox"/> No	As of:
Babysitter Training Certificate:	<input type="checkbox"/> Yes <input type="checkbox"/> No	As of:
<b>Do you have any other courses/certificates that may relate to babysitting?</b>		

<b>Does anyone in your household have any of the following: (please provide copies)</b>		
Up-to-date CPR/First Aid training:	<input type="checkbox"/> Yes <input type="checkbox"/> No	As of:
Babysitter Training Certificate:	<input type="checkbox"/> Yes <input type="checkbox"/> No	As of:

*A copy of your Babysitters Course Certificate must be provided with this form*

<b>What age group do you provide child care for:</b>	
<input type="checkbox"/> 0-11 months <input type="checkbox"/> 12 months to 2 years <input type="checkbox"/> 2 to 4 years	<input type="checkbox"/> 4 years and up <input type="checkbox"/> School-aged children
<b>When would you be available for work? (check all that apply)</b>	
<input type="checkbox"/> Weeknights during the school year - Available hours: _____ <input type="checkbox"/> Monday to Friday - Available hours: _____ <input type="checkbox"/> Weekends (Saturday/Sunday) - Available hours: _____ <input type="checkbox"/> Before/After School - Available hours: _____ <input type="checkbox"/> Summer Availability - Available days/hours: _____	

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If requested, would you be able to provide references?

☐ Yes ☐ No

Have these references seen your interactions with children?

☐ Yes ☐ No

Applicant Signature

Date

## Parent/Guardian Permission Form

The Edmonton Military Family Resource Centre does not conduct reference checks on clients requesting to view the Child Care Registry. Therefore, we strongly advise that you, as parents/guardians, speak with and/or visit any parents or their home before your child provides babysitting services for them.

As the parents/guardian of \_\_\_\_\_, we give permission and agree to allow the Edmonton Military Family Resource Centre to give my child's personal information to individuals interested in contacting them for babysitting purposes. We are aware the Child Care Registry is solely provided for the user's information and convenience, and it is provided without warranty of any kind. We understand that the decision to provide child care to any person accessing the Child Care Registry is solely at our own discretion.

In consideration of the Edmonton Military Family Resource Centre permitting our child to be added to the Child Care Registry program, we, on behalf of our child, heirs, executors, administrators, successors and assigns hereby waive and release any and all claims for damages which we and our child may have against the Crown in right of Canada, the Edmonton Military Family Resource Centre, their Officers, Members, Agents, Employees and all other persons in any way involved with the organizing, planning, controlling, directing or administering the said program and their respective Heirs, Servants, Agents and Assigns for any and all losses caused which our child may sustain while taking part in the Child Care Registry program, or as a result of.

We are aware that the Edmonton Military Family Resource Centre reserves the right to remove our child from the Child Care Registry at its discretion and at any time without notice.

Parent/Guardian 1 Name (please print)

Parent/Guardian 2 Name (please print)

Parent/Guardian 1 Signature

Parent/Guardian 2 Signature

Date

Date

Please note, updates to our Child Care Registry occur on a quarterly basis to ensure accuracy of information and confirmation of continual interest to remain on the list. After three unsuccessful attempts to make contact, information will be removed.

☐ I agree to be contacted