



Downtown Hampton

CHILD DEVELOPMENT CENTER

1306 Thomas Street, Hampton, Virginia 23669 • (757) 825-6200
Please bring completed form to address above or send to info@dhhcdc.org

Child	Nickname	Sex	Birth Date/Due Date
Address			Home Phone
Chronic Physical Problems/Pertinent Development Information/Special Accommodations Needed			
Does Your Child Have an IEP or IFSP? ___Yes ___No	Primary Language Spoken in Home	Ethnic Background	

PARENTS/GUARDIAN

Father	Place Employed/School Attending	Business Phone
Home Address		Home Phone Cell Phone
Mother	Place Employed/School Attending	Business Phone
Home Address		Home Phone Cell Phone
Mother's Email Address	Father's Email Address	
Person(s) or Agency Having Legal Custody of Child		
Home Address		Home Phone
Business Address		Business Phone

How would you like us to contact you?

How did you hear about us?

Desired start date:

For office use only:

1) Who was contacted and how? _____ Date: _____ by: _____

2) Who was contacted and how? _____ Date: _____ by: _____

Result of contact: _____

Actual start date: _____