

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

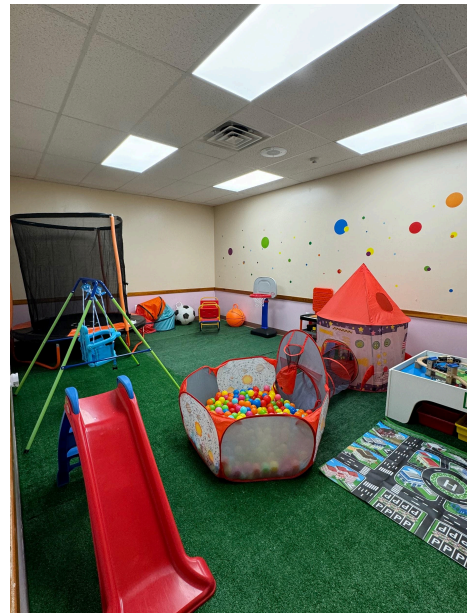
Nana-Manarah

Student Application Form

2025/2026

Student Name: _____

Start Date: _____



Office use only

Application Received on:

Received By:

- ☐ Accepted
☐ Wait List
☐ Referred by _____

Deposit:

- ☐ Yes
☐ No

_____ Cash _____ Check _____ Zelle/ Venmo _____ Other

Nana - Manarah Daycare Application

Nahed Elseify, Day Care Director
484-788-1643 (phone)

PROGRAM _____
START DATE _____

☐ Female ☐ Male

M____T____W____TH____F____

School year (Sep - May) _____ Summer (Jun - Aug) _____ Both _____

Full Name of Child _____ Date of Birth ____/____/____
Address _____ Zip _____

Mother or Guardian _____ Cell Phone No _____
Home Address _____ Employment _____
Work Address _____ Phone _____
Hours _____ Email Address _____

Father or Guardian _____ Cell Phone No _____
Home Address _____ Employment _____
Work Address _____ Phone _____
Hours _____ Email Address _____

People Authorized to pick up your child (Besides Mother / Father)

1- _____
2- _____

People to call in case of EMERGENCY (must list two people; do not list parents of the child)

1. Name _____ Relationship _____
DayTime Phone No _____ Cell Phone No _____
2. Name _____ Relationship _____
DayTime Phone No _____ Cell Phone No _____

Child's Physician _____ Phone No. _____

Emergency Hospital Preference _____ Phone No _____

Hospital Address _____ Dentist _____

Nana - Manarah Daycare
1988 Schadt Ave
Whitehall, PA 18052

CONSENT AND CONTACT FORM

This form is to be completed and signed by the child's parent or legal guardian.

Name of child _____

In the event the child named above is injured or ill, I understand that the caregiver will attempt to contact me, the other parent (if applicable) or the legal guardian at the telephone number provided below:

Parent or legal guardian's name _____

Telephone Numbers _____ on _____ hours/days
_____ on _____ hours/days

Parent or legal guardian's name _____

Telephone Numbers _____ on _____ hours/days
_____ on _____ hours/days

I give permission to take the appropriate measure including contacting the **emergency medical services (EMS) to arrange transportation to:**

_____ or
the nearest emergency medical facility. At no time will the caregiver drive an ill or injured child to an emergency medical facility.

- ☐ ADMIN. OF MINOR FIRST-AID PROCEDURES
☐ TRANSPORTATION BY THE FACILITY WADING

- ☐ WALKS AND TRIPS
☐ SWIMMING

Parent or legal guardian's signature Date

*******IMPORTANT PARENT INFORMATION*******

If custody is established through Family Court, **ALL** papers regarding visitation and primary physical custody **MUST** be on file with the Cohoes Child Development Center's Daycare Program before enrollment of your child. Any changes in the original papers submitted must be updated with the daycare immediately.

Nana - Manarah Daycare

Personal Data Family & Social History Form

Name of child _____ Date of Birth ____/____/____
Mother or legal Guardian _____ Age _____
Father or legal Guardian _____ Age _____

MARITAL STATUS OF PARENTS

Married _____ Living Together _____ Stepfather _____
Separated _____ Stepmother _____ Divorced _____

Custody/Visiting arrangements _____

BROTHERS and SISTERS

Name _____ Date of Birth ____/____/____
Grade in School _____

Name _____ Date of Birth ____/____/____
Grade in School _____

Name _____ Date of Birth ____/____/____
Grade in School _____

CHILD EXPERIENCES

Has child had group play experience? _____

Where _____

Does child have neighborhood playmates? _____

When and with whom does child watch television? _____

What are your child's favorite indoor/outdoor activities? _____

Does your child have fears that you are aware of? _____

DEVELOPMENT HISTORY

At what age?

Crept of hand and knees _____ Name simple objects _____

Sat alone _____ Repeated short sentences _____

Began toilet training _____ Slept through the night _____

Completed toilet training _____

Word child uses for Urination _____

Bowel movement _____ Usual time for bowel movements _____

Nana- Manarah Daycare
PERSONAL DATA CONTINUED

Does child dress self - YES _____ NO _____ Undress self – YES ____ NO _____

What time does your child usually eat Breakfast _____ Lunch _____ Dinner _____?

What time does your child usually go to bed at night? _____ Awaken? _____

Does your child have interrupted sleep? YES _____ NO _____

Do you have any concerns about your child's development? Speech _____ Fine
motor _____ Gross Motor _____ Behavior _____ Social/Emotional _____

What is the dominant language at home? _____

What method of discipline is used at home _____

What is the child's reaction? _____

How would you describe your child's personality?

What are your daycare expectations?

Please explain any special family traditions or celebrations that you would like to share with us. _____

Please explain any other information that will help us better understand your child

I grant permission to Nana Daycare for the following pictures to be taken of my child: Please initial if you agree). Your child's name may or may not appear in the below:

_____ Newspapers _____ Center Website _____ T.V.

_____ Displays _____ Grant Proposals _____ Video Please sign

if you choose not to have **any pictures** taken of your child.

Parent Signature

Date

HEALTH HISTORY

Child's Name_____ Date_____

Does your child have a history of:

High fevers_____ Ear infections_____ Colds_____ Chicken Pox_____

Scarlet Fever_____ Diabetes_____ Hepatitis_____

Mumps_____ Measles_____

Is your child on any medication on a daily basis?_____ If yes, what_____

Has your child ever been hospitalized?_____ If yes, for what?_____

Has your child had any serious
accidents?_____

Has your child ever been exposed to peanut products? Yes_____ No_____

List reactions._____

Does your child have any allergies? Yes_____ No_____ Unknown_____

Do you know what the allergy is caused by?_____

Signs of reaction: Asthma _____ Difficulty Breathing _____ Swelling_____

Hay Fever_____ Hives_____ Other _____

Has your child ever seen a dentist_____ Who?_____ Has your

child had a vision screening_____ Hearing Tested_____

Give a statement of your child's overall
health_____

DAY CARE PARENT FEE AGREEMENT

Nana - Manarah Daycare
1988 Schadt Ave
Whitehall, PA 18052
Phone Number: (484) 788 1643

Child's Name _____
Program _____ Start Date _____ Is
this a joint account Yes _____ No _____ If yes
please list other responsible party _____

REQUIREMENTS UPON ENROLLMENT:

PAYMENT REQUIREMENTS:

1. A security deposit equivalent to one month's tuition.
2. The first month's payment must be made before the start date.
3. A completed registration packet.

PAYMENT POLICY:

Parents must choose between monthly or yearly payment options. Payments are always made in advance for the upcoming period.

- Monthly Payments: The full payment for the upcoming month is due on the Monday before the first week of the new month.
- Yearly Payments: Parents choosing this option must pay the full year's tuition upfront.

I/We choose to pay: _____ Monthly _____ Yearly

Parent Fee: \$ _____

Payment Instructions:

1. Payment statements will be provided at the beginning of each month.
2. Payments must be received on time to maintain enrollment.
3. Payments should be made via check or money order to "Nahed Elseify" with the child's full name and program in the memo line.
4. A \$30.00 fee will be charged for all returned checks.

DELINQUENT PAYMENT POLICY:

Failure to make payments on time will result in the following actions:

1. If payment is not received by the due date, a reminder call will be made.
2. If payment is still not received within one week, a written notice will be sent requiring immediate payment.
3. If no payment is received by the second week, the child will be withdrawn from the program by that Friday. The security deposit will be applied to the outstanding balance.
4. Unpaid accounts beyond 30 days may be sent to a collection agency and subject to small claims court.

Deposit Paid: _____ Date Paid: _____

Parent/Guardian Signature & Date: _____

Daycare Director/Administrator Signature & Date: _____

NANA- MANARAH DAYCARE

Calendar



HOLIDAYS/PLANNED CLOSINGS

All centers, programs and the administrative office will be closed for business on all listed dates.

2025

September 1st	Labor Day
November 27th, 28th	Thanksgiving
December 31st	Winter Holiday

2026

January 1st & 2nd	New Year's Day
February 17th	First day of Ramadan
March 19th & 20th	Eid-ul-Fitr
May 25th	Memorial Day
May 26th & 27th	Eid-ul-Adha
July 4th	4th of July

Policy

Parents must pay for child care regardless of attending. Payment **must** be made before the service, you have the option to pay Monday morning for the week or every two weeks or the start of the month. Kids on vacation or have a doctor appointment or not feeling well are still mandatory to pay.

Age Range Price	School Year Full Time (M - F 7AM - 4PM)	School Year Part Time (3 days a week)	Summer
6 weeks - 12 Months	(\$11,000) Deposit \$1,100 Monthly Payment \$1,100 Sep - May	(\$7,500) Deposit \$750 Monthly Payment \$750 Sep - May	Weekly Payment \$250
Young Toddler (13 Months-24 Months) Includes breakfast & 2 snacks	(\$10,500) Deposit \$1,050 Monthly Payment \$1,050 Sep - May	(\$7,500) Deposit \$750 Monthly Payment \$750 Sep - May	Weekly Payment \$250
Older Toddler (24 Months-36 Months) Includes breakfast & 2 snacks	(\$9,250) Deposit \$925 Monthly Payment \$925 Sep - May	(\$7,250) Deposit \$725 Monthly Payment \$725 Sep - May	Weekly Payment \$225
Preschool (3 Year - 4Year) Includes breakfast & 2 snacks	(\$8,500) Deposit \$850 Monthly Payment \$850 Sep - May	(\$7,000) Deposit \$700 Monthly Payment \$700 Sep - May	Weekly Payment \$225

Food:



Food provided will all be homemade, preference all children eat the same meal together.

Lunch and one snack additional cost for the week is \$25.

Breakfast: Pancake, French toast, scrambled eggs, grilled cheese

Snacks: Yogurt, fruits, veggies, string cheese, cereal, applesauce

Lunch: Mac & Cheese, Chicken, Pasta with ground meat, Veggie with rice, soup, etc..

Healthy eating habits are more likely to stay with you if you learn them as a child. That's why it's important that you teach your children good habits now! At Nana's Daycare we ensure to fuel your kids with healthy choices.