

THE PLAY LAB FOUNDATION'S

EARLY CHILDHOOOD COMMUNITY

Full Name (s)	– Date –	Date	
Address ———————————————————————————————————			
•••••••••••••••••••••••••••••••••••••••	•••••	••••••	
 Is this your child's first experience in a child care setting? 	Yes	No	
• Is this your first experience with a self-directed program? if yes, please specify if you would like to know more.	Yes	No	
Is your child a part of any organized programming? if yes, please specify	Yes	No	
Are you familiar with liberated learning? if not, would you like to know more?	Yes	No	
allergies queer health cognitive neurodivergent trauma neurodiverse ability cultural home life		Access quality of care social environment	
How did you hear about ou	r program ?		
Social Media word of mouth Website Former client OPRF MomMai		ecommendation Collaboration for Early Learnir Directory	
** All of the given answers are correct and true to the best of m	ny knowledge.		
	Kis	a Marx	
Client's Signature	Four	Founder/Practitioner's Signature	

THE PLAY LAB OAK PARK

WHAT YOU SHOULD KNOW ABOUT OUR PROGRAM

theplaylabfoundation@gmail.com

FOUNDERS WORK EXPERIENCE

EARLY CHILDHOOD

PNN - PRESENT

Background includes Early
Childhood Education, Child

Development K-12

Education and Special

Education

HOME-BASED PROGRAMING

2009 - PRESENT
Liberated Learning
Pedagogy. Children learn best
when well-being, connection,
and autonomy are a part of the
curriculum.

ADVOCACY

2010 - PRESENT
Supporting the rights of all
children to think, feel, act
and be as a means of
collective liberation



PHOTOGRAPHY

still and video documentation is used for continuous learning as well as for purposes of advocacy.



LEARNING

The children are the curriculum and their well-being, connection, safety, and growth are the only objectives.



WRITING

Is the way that I advocate for the rights of children. I will often use their daily adventures, but never violate their privacy.

HOW IT WORKS

Fill out the application and return it to theplaylabfoundation@gmail.com Once confirmation is received, we will begin the intake process to get your crew member clubhouse ready! Thank you for choosing to honor children and childhood.

WAYS TO PLAY

PAY TO PLAY

PLAYDATES

FULL DAY OF PLAY

CREW MEMBERSHIP

THE PLAY LAB FOUNDATION

Early Childhood Community Registration Form



Please answer the questions below

Child's name:	What type of care are you seeking?
Provider 1 Name	Provider 2 Name (if applicable)
Address- Please add both locations w	here two households apply
Best method of : email communication	cellphone landline text
Child's Name :	
Age :	
Date Of Birth	
Email Address	Phone Numbers
Provider 1 :	
Provider 2 :	
Questions :	
10	00 Hours outside movement. This means that someting that you are comfortable with?
	ity at Kidcrwadventures. Enrolled famiilies n for home visits and participate in seasonal expectation you're receptive to?
process art and creativity. Sometin	s! We encourage sensory rich, often messy nes your child may come home with paint on ody. Will this pose a problem for you?