



Enrollment and Tuition Fees

SPONSOR INFORMATION

Sponsor Name _____ SSN ____ - ____ - ____ Email _____

Address _____ City _____ Zip Code _____

Home Phone Number _____ Other Phone Number _____

Employment _____ Business Phone _____

Co-Sponsor Name _____ SSN ____ - ____ - ____ Email _____

Address _____ City _____ Zip Code _____

Home Phone Number _____ Other Phone Number _____

Employment _____ Business Phone _____

Permitted to Remove Child: Father: Yes ____ No ____ Mother: Yes ____ No ____
(If No, Court Ordered Documents required.)

Persons Other than Sponsors Permitted to Pick Up Child In An Emergency: (Required One Local Contact)

1. Name _____ Phone Number _____

Address _____ D.L # _____

City _____ State _____ Zip _____

2. Name _____ Phone Number _____

Address _____ D.L # _____

City _____ State _____ Zip _____

STUDENT INFORMATION

Student Last Name _____ First Name _____ Sex _____

Date of Birth _____ Allergies Food and Drug _____

Physician/Pediatrician _____ Phone _____

Is Child taking any medication? ____ Is Child Toilet Trained? ____ First time in Preschool? ____

Schedule of Attendance and Fee Payments

____ 2 Day (Tuesday and Thursday) ____ 3 Day (Monday, Wednesday and Friday) ____ Full Week

Age Group: _____ Hours of Attendance: _____

A Non-Refundable Registration Fee and a **Tuition Deposit Fee** are due upon enrollment. I understand the cost of the above-stated schedule to be \$ _____ **per week**, and that I agree to pay tuition **In Advance** according to the payment policies as outlined on the Agreement Form.

I have read and understood the Tuition Fee Payment Policy, which is part and parcel of "**The Childlife Preschool Agreement.**"

Signature of Sponsor Date

Signature of Co-Sponsor Date



AGREEMENT FORM

ANNUAL REGISTRATION FEE - A non-refundable Registration Fee shall be paid at the time of enrollment, and is paid each consecutive year during fall registration. Payment of Registration Fee reserves your child's space for the upcoming School Year.

TUITION DEPOSIT - A Deposit is paid at the time of enrollment and will be applied to the final week your child attends school each year. Any remaining balance after the Tuition Deposit is applied must be paid in accordance with the tuition fee payment policy below.

TUITION FEES - Tuition Fees are based upon the Program and Schedule selected at the time of enrollment. All schedules have specific day and time restrictions. Students on part time schedules must attend only their scheduled days. Students attending outside of their selected schedule hours will be charged the extended care rate. Tuition must be prepaid on Monday each week with a Personal Check, Credit Card or Money Order. Credit Card Payments may include an additional processing fee. No Cash will be accepted for Tuition Payments. Tuition Rates are subject to change at anytime.

STUDENT WITHDRAWAL - The Sponsor/Co-Sponsor must provide written notification to the Director two (2) weeks prior to withdrawal of a student. All accounts must be paid in full prior to the last week of attendance. Failure to provide the required two (2) weeks notice of withdrawal will result in billing of two additional weeks of tuition and forfeit of the Tuition Deposit. Any balance due must be paid as outlined in the Tuition Fees payment policy above.

COLLECTIONS - Service will be suspended on accounts that have not been prepaid in accordance with the TUITION FEES POLICY above. A Collection Agency will be employed to collect balance left unpaid. The Parent/Guardian will be responsible for all late fees and legal fees associated with the collection of unpaid balances. Unpaid balances will be reported to major Credit Reporting Agencies.

NSF FEES - A Fee will be added to the customer's account for any returned checks. This fee will be no less than \$30.00 and no more than allowed by applicable laws. After a NSF Payment has been received all future tuition payments must be made with a Money Order or Bank Cashier Check.

LATE PICK UP CHARGES - A late pick up fee will be charged after the closing hours of the Preschool at 6:00 pm. The fee is \$1.00 per minute or any fraction thereof. The fee is due at the time the child is picked up. Please notify the Director as soon as you know you will be late.

SCHOOL HOLIDAYS - Weekly tuition is not prorated when School Holidays fall within a given week. The Director will provide a list of School Holidays at the beginning of each school year.

STUDENT VACATIONS - Please notify the Director when your child will be absent from school. **No allowances or credits will be given for Vacations, missed days, sick leave, or other family obligations (births, weddings, funerals, etc.)** No tuition will be billed for the week Childlife is closed between Christmas and New Year's Day.

SUMMER VACATIONS - Families may elect to not attend in the summer with a guaranteed space for the Fall by paying the annual registration fee. When a family registers for the summer, there will be no vacation credits during the summer. See the Director for further details.

PRESCHOOL POLICIES

SPECIAL INSTRUCTIONS - Any special instructions should be given in writing to the Director.

RELEASE OF CHILDREN - Children will be released only to those persons whose names are listed on the Enrollment Form. All Emergency Contacts must present a valid DRIVER'S LICENSE or PICTURE I.D. Prior written authorization from the Parent/Guardian will be required for others not listed on the Enrollment Form to pick up your child.

EMERGENCY CONTACT - A Local Emergency Contact Person must be provided on the Enrollment Forms. A physical address and telephone number are required for each Emergency Contact.

CONFIDENTIALITY - All personal information regarding a student will be confidential. Information will be distributed to outside agencies with written authorization of the Parent/Guardian or as required by law.

CHILD ACCIDENT INSURANCE - Childlife Preschool carries a student insurance policy on each student. This policy is secondary to the parent/guardian's insurance. It is the parent's responsibility to cover any deductible charges.

DRESS CODE - Children should wear washable, comfortable clothing. For safety, a rubber-soled shoe with covered toes must be worn (NO SANDALS) to school. All belongings must be labeled with your child's name. No jewelry or pretend props should be worn to school.

DAILY REGISTRATION - Parent's are required to sign in and out daily. Direct contact with the Teacher is required when dropping off or picking up your child.

CHILD ILLNESS - Parents will be notified if their child becomes ill at the school. Parents are required to pick up their child in a timely manner after notification. Children with communicable illnesses are not permitted to return to school until they are free of all symptoms. A Doctor's note may be required before a child may return to school. Emergency procedures will be followed in the event of a serious accident.

SPECIAL DIETARY NEEDS - A Doctor's note will be required to document any special dietary needs before food may be brought from home.

PRESCRIPTION MEDICATIONS - Prescription medication may be administered at the school with written permission of the parent. Such medication must be in its original container, with the child's name, exact dosage and prescription date. OVER-THE-COUNTER medicines will **NOT** be administered at school.

DISCIPLINE POLICY - Childlife Preschool follows the "CHILD DAY CARE STANDARDS" of the Florida Administration Code - Chapter 1 OM-12.013 on Child Discipline, and uses a positive discipline approach to behavioral issues.

CHILD CARE FACILITY BROCHURE - Section 1 OM-12.008 of the Florida Administration Code requires that parents must receive or read a copy of the Child Care Facility Brochure (CF/PI#175-24), "KNOW YOUR CHILD'S DAY CARE CENTER."

I (We) have received in writing and read the "ENROLLMENT AND TUITION FEES", the "PAYMENT AND PRESCHOOL POLICY", and the "CHILD CARE FACILITY BROCHURE" as outlined above, and do hereby abide by this "AGREEMENT."

Signature of Sponsor

Date

Signature of Co-Sponsor

Date



RELEASE FOR EMERGENCY CARE

I hereby give my consent to any emergency facility and physician to administer necessary treatment to:

(Name of Child)

Primary Care Physician's Name

Telephone Number

Allergies: _____

Date of Last DPT or Tetanus: _____

Insurance Company covering child: _____ Policy Number: _____

Address: _____ City _____ State _____ Zip _____

Telephone Number: _____

In the event of an emergency at which time I cannot be reached, I give consent to transport by ambulance.

Signature of Parent/Guardian/Sponsor

Date

Driver's License- State ____ # _____ D.O.B. _____
Race _____ Sex _____ Height _____ Hair _____ Eyes _____

Signature of Parent/Guardian/Co-Sponsor

Date

Driver's License- State ____ # _____ D.O.B. _____
Race _____ Sex _____ Height _____ Hair _____ Eyes _____

STATE OF _____ COUNTY OF _____

On the _____ day of _____, 20____, before me came _____
_____ to me known to be the individual described in and who
executed the foregoing instrument and acknowledged that (s)he executed the same.

Notary Public



NUTRITION AGREEMENT

AS YOUNG CHILDREN GROW THE FOOD THEY EAT IS THE MATERIAL THEIR BODIES USE TO DEVELOP PHYSICALLY AND COGNITIVELY. THE FOOD A CHILD EATS AFFECTS HIS OR HER GROWTH, ENERGY, ATTITUDES, INTELLIGENCE AND GENERAL HEALTH.

MOST CHILDREN REALLY ENJOY BRINGING "THEIR OWN LUNCH" TO SCHOOL. A LUNCH PACKED FROM HOME BONDS ABSENT PARENTS TO THEIR CHILD AT LUNCH TIME.

NAME OF CHILD _____ DOB _____

I AGREE TO PROVIDE A MID DAY MEAL THAT INCORPORATES EACH OF THE FOLLOWING FOOD ITEMS: **FRUIT, VEGETABLE, STARCH AND PROTEIN** TO MEET MY CHILD'S NUTRITIONAL REQUIREMENTS (UNLESS A LUNCH PROGRAM IS PROVIDED AT MY CHILD'S SCHOOL). I UNDERSTAND I WILL BE CHARGED A FEE FOR CHIDLIFE TO PROVIDE ANY COMPONENTS THAT ARE MISSING. FOODS LOW IN SUGAR AND SATURATED FAT WITH MINIMAL FOOD DYE AND PRESERVATIVES ARE RECOMMENDED FOR ALL AGE GROUPS. NO COLA OR CANDY IS PERMITTED.

CHIDLIFE PRESCHOOL AGREES TO PROVIDE MILK WITH THE MID DAY MEAL AND TWO HEALTHY SNACKS.

INDICATE ANY FOOD ALLERGIES OR SPECIAL DIETARY ISSUES AFFECTING YOUR CHILD:

FOOD: _____	REACTION: _____
_____	REACTION: _____
_____	REACTION: _____

SPECIAL DIETARY ISSUES: _____

FOR SCHOOLS WITH A LUNCH PROGRAM ONLY:

DUE TO MY CHILD'S ALLERGY OR SPECIAL DIETARY ISSUE, I AGREE TO PROVIDE A DOCTOR'S NOTE ANNUALLY TO SUBSTANTIATE THE NEED FOR A REPLACEMENT TO THE FOOD ITEM BEGINS SERVED AS OUTLINED ON THE MENU. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO PROVIDE A HEALTHY ALTERNATIVE FROM THE SAME FOOD GROUP AS THAT ITEM IN MY CHILD'S MEAL.

Signature of Sponsor

Date

Signature of School Director

Date



Behavioral Code of Conduct

The Behavioral Code of Conduct applies to all children and adults on the premise of our School.

—Children—

Children are required to comply with the following behavioral guidelines while on the School property. (All guidelines will be applied based upon age appropriate social and emotional guidelines for the individual child involved.)

- Children will be respectful of all teachers, management personnel, other children and adults.
- Children will not intentionally destroy or damage school property or property of the other children and adults.
- Children will use appropriate language. Vulgar or threatening language will not be tolerated.
- Children will not touch other children or adults inappropriately.
- Children will participate in classroom activities and follow the daily routine.

The goal of the children's Behavioral Code of Conduct is to establish a minimum level of acceptable behavior from the children in the school. If a child is unable to meet this minimum level of acceptable behavior following procedure will be followed:

1. Parents will be notified by telephone, incident form or conference.
2. The Parents and School will devise a behavior modification plan to stop the inappropriate behavior and encourage appropriate behavior.
3. A prescribed period of time will set to implement this plan and for the child to stop the behavior.
4. If the behavior does not stop in the prescribed time limit, the child will be expelled from the school.

—Adults—

Parents, family members or other adults authorized to be on school premise are required to comply with the following behavioral guidelines while on the School property.

- Adults will be respectful of all teachers, management personnel, other children and adults.
- Adults will use appropriate language. Vulgar or threatening language will not be tolerated.
- Adults will not touch children or adults inappropriately. Corporal punishment is expressly prohibited while on school property.
- Adults will not damage or destroy school property.
- Adults will comply with all safety procedures which is not limited to keeping all school doors closed, checking that door locks latch upon exiting from building, no parking in the fire lane in front of the building and traveling through the school's parking lot slowly while watching for children and other adults.
- Adults will refrain from discussing specific information about other children or families at anytime, whether on or off of school property.
- Adults will bring all comments, concerns or issues to the School Director immediately.

If an Adult does not comply with this minimum level of acceptable behavior they will be denied access to the school and its property. Further consequences for non-compliance with these guidelines may include but are not limited to expulsion, criminal charges, and legal action.

I have read, understand and agree to comply with Behavioral Code of Conduct as it applies to myself and my child(ren),

[Name of Child(ren)]

Signature of Parent/Guardian/Sponsor

Date

Signature of Parent/Guardian/Co-Sponsor

Date



Welcome to Childlife Preschool.

To enter the building you will need to input your personal identification number (PIN) followed by the * key into the keypad at the front door. Generally, the last four digits of your Social Security Number will be used as you Personal Identification Number (PIN). After you enter a valid PIN the door will buzz for 5 seconds to alert you to open the door.

Please DO NOT give your PIN number to anyone. Also, please do not open the door for anyone or hold the door open to allow others to enter.

If family or friends will be coming to pick up your child, advise them to ring the front door bell and someone will assist them immediately. Family or Friends that will be picking up your child on a consistent basis can be assigned their own PIN. Please see the Director for more information.

Also if you have problems with your PIN, please ring the front door bell for assistance. Notify the Director immediately if you are experiencing difficulties with your PIN. Please contact me if you have further questions.