

# CHILD'S ENROLLMENT RECORD



**LEARNING CENTER**

Child's Full Name \_\_\_\_\_  
Name Child is called by \_\_\_\_\_  
Current Age \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex M ☐ F ☐  
Address \_\_\_\_\_  
City \_\_\_\_\_  
Zip \_\_\_\_\_  
Entrance Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Withdrawal Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Elementary School Child Attends \_\_\_\_\_

Children may be released to the person(s) signing this agreement or to the following, without written permission from parents.

Name/Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Address \_\_\_\_\_  
Name/Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Address \_\_\_\_\_  
Name/Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Address \_\_\_\_\_  
Parent or Guardian Responsible for payment \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

## CHILD'S PERSONAL RECORD

Father's Name \_\_\_\_\_ SS# \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Address \_\_\_\_\_  
Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Hours \_\_\_\_\_  
Mother's Name \_\_\_\_\_ SS# \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Address \_\_\_\_\_  
Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Hours \_\_\_\_\_  
Legal Guardian \_\_\_\_\_  
Phone \_\_\_\_\_  
Child's Living Arrangements \_\_\_\_\_ Family Status M ☐ D ☐ S ☐ Other ☐  
Brothers & Sisters living at home \_\_\_\_\_

Does your child have any special needs or medical requirements \_\_\_\_\_

USE EXTRA SHEET IF NEEDED

Does your child need help in (check) ☐ Dressing/Undressing ☐ Washing Hands ☐ Eating ☐ Toileting

Child's Physician \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Comments \_\_\_\_\_

Any Allergies \_\_\_\_\_

Emergency contact when parents cannot be reached \_\_\_\_\_

### Kids' Stop Learning Center Policies

1. Kids' Stop welcomes all children from Birth - 12 yrs. The Center is open January - December closing only for the following holidays: New Years Day, Memorial Day, July 4th, Labor Day, Thanksgiving, and Christmas Day. There is no reduction in fees for holidays. The center will also close due to inclement weather; notification of closing will be announced on the radio.
2. Tuition Payment Procedures: Your child's tuition is a yearly fee, broken into monthly or weekly fees for ease of payment. Our annual enrollment fee of \$65.00 is payable when a child enrolls or re-enrolls. Enrollment fees are non-refundable.
3. Tuition Payment is due on Mondays in advance of service. Childcare will not be provided without payment in full. A \$10.00 late fee will be added on Mondays at 6pm. An additional \$3.00 per day will be added until full payment is made. If your account becomes over due after one week, your child will be un-enrolled and no longer be able to attend our center. \_\_\_\_\_ (Initial)
4. Returned checks for whatever reason will result in a \$35.00 charge plus any bank fees. Recurrent returned checks will cause the account to be collected on a cash basis only. All balances will incur a \$10.00 a week late fee.
5. Accounts that are past due for two weeks are referred to the Credit Bureau or Magistrate Court for collection. Parents are responsible for paying the added collection fees and/or court cost.
6. If planning to withdraw your child from Kids' Stop, a two-week written notice is required. If no notice is given, we will charge your account two weeks from the day you withdraw. Tuition is due at the time of notice or withdrawal for the remaining two weeks.
7. Kids' Stop accepts Department of Family and Children Services Rates. All DFCS children must attend at least two days per week for DFCS to pay their tuition. If your child does not attend at least one day per week, you, the parent/guardian, are responsible for the full tuition for that week. \_\_\_\_\_ (Initial)

\*\*\*\* Once you have read and completely understand Lines 1 - 7, please sign and date below \*\*\*\*

Sign \_\_\_\_\_ SS# \_\_\_\_\_ Date \_\_\_\_\_

8. We open at 6:30 a.m. (Cartersville Center at 6:00 a.m.) and promptly close at 6:00 p.m. Monday - Friday. Services are provided for a maximum of 9 hours each day. It is important that you pick up your child by closing time; otherwise there will be a late charge of \$5.00 for every 5 minutes past 6:00 p.m.
9. All enrollment forms including a current immunization record signed by a physician or other health source must be on file prior to the first day in the center.
10. Routine visits to a doctor, clinic, or dentist are the responsibility of the parents.
11. Sick children with 101 or higher temperatures and other symptoms such as diarrhea, sore throat, etc., shall not be brought to Kids' Stop.
12. Kids' Stop will notify parents in case of exposure to a notifiable communicable disease. Parents should notify Kids' Stop if their child has a communicable disease as defined on the chart of communicable diseases and their recommendation for readmission shall follow guidelines of chart posted in the center.
13. No medicine will be administered. Only life-threatening Emergency Medicines can be administered with our Emergency Medical Form filled out completely.
14. All injuries or accidents will be reported to parents. Should medical care be necessary and Kids' Stop cannot reach the parents, Kids' Stop will notify the child's physician and/or the Kids' Stop van will take the child to the nearest emergency medical center (Floyd, Redmond, Cartersville Medical Center, Urgent Care).
15. I understand Kid's Stop uses photos inside the classroom for learning fun. \_\_\_\_\_ (Initial)
16. I understand that Kid's Stop has a private facebook page. It is used for communication of important information along with art and fun.

☐ YES, I give permission for my child's photos and name to be used on the facebook page.

Child / Children Name(s) \_\_\_\_\_ Parent Signature \_\_\_\_\_

☐ NO, do not use my child's photos and name to be used on the facebook page.

Child / Children Name(s) \_\_\_\_\_ Parent Signature \_\_\_\_\_

17. Your child's clothing should be comfortable and easy for him/her to manage (buttons in front, elastic waist bands). Tennis shoes or soft-soled shoes are required. No sandals, flip-flops, open-toed shoes, crocs or hard-heeled boots are allowed to prevent toe injury or falling. Tennis shoes, or soft soled shoes **ONLY** can be worn at the center.
18. All articles of clothing should be clearly marked with child's name to prevent loss. We are NOT RESPONSIBLE for lost or stolen articles. Children's wet or soiled clothing shall be stored in individual plastic bags immediately after being removed from the child. A change of clothing should be left at the center at all times.
19. In the event of severe weather, fire, gas leak, bomb threat, physical plant problems, and the building must be evacuated; children will be taken to the nearest fire station to the center. Children will be transported by Kids' Stop vans. \_\_\_\_\_ (Initial)
20. Children are provided with toys at the center and should be discouraged from bringing toys except on special occasions, such as Show and Tell days.
21. Children are accepted to the center that will profit from group experience in this setting. At the end of 3 months, it may be determined that the child will not profit from this service and other arrangements be made.
22. Kids' stop provides a nutritional, well-balanced hot breakfast, lunch, and afternoon snack. Weekly menus are posted in advance in the center and parents may refer to these at any time. Breakfast is served to the children arriving before 8:00 a.m.
23. Children should not bring food, snacks, or gum unless arrangements have been made for a special event or holiday.
24. The parents will provide disposable diapers, wipes, and bottles (with cap) & baby foods (unopened) for their child. All bottles and food containers MUST be clearly labeled with the child's first and last name and date. All bottles and food containers MUST be taken home daily. All bibs must be snap or Velcro. On an infant's first day, parents MUST completely fill out the infant feeding plan. This must be updated every 3 months.
25. Each preschool child will have the advantage of an afternoon nap each day.
26. **Vacation and Sickness Procedures:** If a child does not attend school for a full week (a maximum of 3 weeks each year) and if the center is notified no later than Tuesday of that week, one half (1/2) of the regular tuition is charged. It is best to notify the center in writing or by direct phone contact with supervisor. If a parent has used the 3-week half-tuition allotment, full tuition will be charged, even if the child is not in attendance. \_\_\_\_\_ (Initial)
27. Kids' Stop is required to report and suspected child abuse, neglect, exploitation or deprivation to the **Department of Family and Children Services**.
28. Kids' Stop is required to report any suspected case of notification communicable diseases to the local **Health Department**.
29. There will be no smoking in the building.
30. Kids' Stop Learning Center agrees to obtain written authorization before your child participates in routine transportation, field trips, and special activities away from the facility.
31. Kids' Stop uses positive guidance techniques, including redirection anticipation and elimination of problems. We use positive reinforcement and encouragement to instill confidence and self-value. Corporal punishment is strictly prohibited in any form. "Time-out" with limits for each age group is our only disciplinary action. We stress interaction between teacher and parents to help in working with problems that may arise.
32. The following information is posted in the center: license, copy of rules, review of evaluation report, communicable disease chart, statement of parental access, names of persons in charge, currently weekly menu, emergency plans for severe weather and fire, statements for visitors.

**I, the undersigned, have read and understand the policies of Kids' Stop, and agree to the provisions.**

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

## PARENTAL AGREEMENT

- I Before any Emergency Medicine can be administered to my child, I will complete the Emergency Medical Action Plan form. This will include the date, full name of child, name of medication, prescription number, and detailed description of dosage, date and time of day medication is to be given. Medicine will be in its original pharmacy labeled container.

I understand that my child will not be allowed to enter or leave the facility without being escorted by the parent(s), or person authorized by parent(s), or facility personnel. I also understand that signing my child's attendance form is required daily for the purpose of meal counts and insurance purposes.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g., telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunization records, etc.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- II. My child has my permission to participate in the water activities planned by Kids' Stop. I understand that he/she will be supervised by a certified lifeguard. Safety rules will be enforced. This is not intended as a waiver or release of any legal responsibility.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- III My child has my permission to ride the Kids' Stop school bus to and/or from Elementary School.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- IV Should my child become ill during the time that he/she is in the care of Kids' Stop Learning Center or suffer an accident of any nature, the center shall undertake to contact me immediately, it shall be authorized to secure such medical attention and care for the child as may be necessary

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Authorization to Dispense External Preparations

590-1-1--20(1)

Parent Authorization. Except for first aid, personnel shall not dispense prescriptions or non-prescription medications to a child without specific written authorization from the child's physician or parent. Such authorization will include, when applicable, date; full name of the child; name of the medication; prescription number, if any; dosage; the dates to be given; the time of day to be dispensed; and signature of parent.

I give Kid's Stop, permission to apply one or more of the following topical ointments/preparations to \_\_\_\_\_ in accordance with the directions on the label of the container.

Child's Name

\_\_\_\_\_ Baby Wipes

\_\_\_\_\_ Band-Aids

\_\_\_\_\_ Neosporin or similiar ointment

\_\_\_\_\_ Bactine or similiar first aid spray

\_\_\_\_\_ Sunscreen

\_\_\_\_\_ Inspect Repellent

\_\_\_\_\_ Non-Prescription ointment (such as A & D, Destin, Vaseline)

\_\_\_\_\_ Baby Powder

Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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Job: Kid's Stop - Child Enrollment Form - V11 - Rev. 1802

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