

Saint Boniface Preschool Enrollment Information for 2011-2012

Enrollment Date: _____

Child's Legal Name _____ Date of Birth _____
First Middle Last Nickname

Home Address _____
Street City, State Zip Code

Gender _____ Home Phone _____

Primary Hours of Care: From: _____ To: _____
Days of the week in care: (check all that apply) Mon. ___ Tues. ___ Wed. ___ Thurs. ___ Fri: ___

Child Lives with Both Parents Mother Father Does a custodial agreement exist? Yes No

Request a set of school communications for each parent Yes No

Mother's Name _____ Social Security # _____

Address _____

Place of Employment _____ Work phone _____

Cell# _____ email address _____

Father's Name _____ Social Security # _____

Address _____

Place of Employment _____ Work phone _____

Cell# _____ email address _____

Is there anything we should know about your child while he / she is at our center (example- allergies, likes/dislikes, developmental needs)? Explain:

Child's Physician _____ Telephone _____

Child's Dentist _____ Telephone _____

Preferred Hospital _____ Insurance _____

Contacts

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached:

<u>Name</u>	<u>Telephone Number</u>	<u>Drivers License #</u>
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____

Please check here if parent will be responsible for providing all snacks for their child, and not the school
 Yes

Please read and initial each statement in agreement with:

_____ I hereby give Saint Boniface Preschool permission to contact the physician named (or health resource) and to act for me in the case of an emergency if I cannot be reached.

_____ I hereby give permission to Saint Boniface Preschool to take pictures or videos of my child in connection with their daily activities at the center.

_____ I hereby give permission to Saint Boniface Preschool to publish our names and address in the school directory.

_____ I hereby give permission for my child to participate in all of Saint Boniface Preschool's scheduled activities.

_____ I understand that I will provide my child's lunch during the time period in which he/she is at the facility. I am responsible for meeting my child's nutritional needs according to present recognized nutritional standards, as well as in accordance with the *Choking Prevention Guidelines* detailed in the Handbook. If a modified diet is prescribed by a physician, I am responsible for obtaining and providing the school with the physician's order and a copy of the sample meal plan.

_____ I understand that if my child is being seen by a Developmental Specialist that a developmental plan for him/her needs to be on file with the Preschool office.

_____ I have received a copy of the Child Care Facility Brochure, "Know Your Child Care Facility".

_____ I have received the Parent Handbook for the current year. I hereby accept the Preschool polices and procedures as written, and also accept my responsibilities for the Payment Policies of the school.

_____ I have read and accepted the "Health and Safety" and "Code of Conduct" policies in the Parent Handbook.

_____ I understand that the disciplinary policy of the Preschool is listed in the Parent Handbook. All disciplinary actions taken by the Preschool will be reported to the parents in writing.

_____ I am aware that to be eligible for the school summer session my child must be 2 years of age by June 1st.

_____ I am aware that no child under the age of 18 is authorized to pick-up my child from school.

_____ I understand that if a restraining order or sole custody agreement is in effect, a certified copy must accompany enrollment information.

_____ I am aware that, for legal purposes, babysitting of an enrolled student is not permitted by any Preschool staff employee.

***** A non-refundable deposit of \$100 per student is required (applied to tuition) *****

Parent/Guardian's Signature

Date Form Completed

I have reviewed the Enrollment Form, and found it to be complete with all necessary information as indicated:

Operator's Signature

Date of Enrollment

The following forms need to be in your child's file prior to the 1st day of attendance:

- _____ (1) Enrollment Information Form (completely filled out and signed)
- _____ (2) Current Physical Form (Hrs-H 3040)
- _____ (3) Current Immunizations Record (DH 680)