



ENROLLMENT APPLICATION AND CONTRACT

Please print or type all information

Date _____

CHILD'S INFORMATION				
Child's Legal Name	Child's Nickname	Date of Birth	Gender	Home Phone #
Home Address	City	State	Zip Code	

FAMILY INFORMATION
Marital Status of Child's Parents: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Other (explain)
Child Lives With: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (explain)
Limited Visitation Rights or Special Circumstances:

Mother's Name	E-Mail	Home Phone #	Cell Phone #
Home Address (if different than above)	City	State	Zip Code
Employer	Work Address	Work Phone #	

Father's Name	E-Mail	Home Phone #	Cell Phone #
Home Address (if different than above)	City	State	Zip Code
Employer	Work Address	Work Phone #	

List all siblings as well as others living in the home.		
Name	Relationship	Age or Date of Birth

*For purposes of this Enrollment Application & Contract, the terms "parent" and "legal guardian" are interchangeable and refers to the child's natural parent or other person with legal custody of child.

PROGRAM ASSIGNMENT		
School Year	Assigned Classroom	First Date of Attendance
20_____ - 20_____		
Enrollment Status (circle one)	If Part Time, List Days of Attendance	Public School District
Full Time Part Time Registered Drop-In		

The child will be assigned to the classroom above until the completion of the school year, unless it is mutually determined by all parties that it is in the best interest of the child to be reassigned to another program within the school. I understand that my child may be in a program with children who are slightly younger and/or older than my child or with children who display different levels of ability.

INITIALS OF PARENT _____

ENROLLMENT POLICY & AGREEMENT
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Initial and continued enrollment will be at the discretion of WOODHAVEN ACADEMY based upon the best interests of the child, the expectation that he/she will benefit from the program and the welfare of the other enrolled children. Enrollment shall be without regard to race, creed, sex, or national origin.

A copy of this ENROLLMENT APPLICATION AND AGREEMENT will remain within the files of WOODHAVEN ACADEMY so long as the child remains actively enrolled at the school and shall be available for inspection by the parent at any time, upon request. All information, written or otherwise shared, will remain confidential. INFORMATION IN CHILD’S FILE MUST BE KEPT CURRENT. The parent is required by state law to update information as necessary, with changes initialed and dated by the parent and the Director. Parents agree to notify the school immediately of any change in phone numbers, work locations, emergency phone numbers, family physician, etc.

HOURS OF OPERATION: Woodhaven Academy is open from 6:30 A.M. to 7:00 P.M., Monday through Friday, January through December. WOODHAVEN ACADEMY will be closed in observance of the eight (8) major national holidays, **and** days of inclement weather when closing is determined necessary by WOODHAVEN ACADEMY. Closings will be posted on the Woodhaven Academy website and television stations carrying our emergency closings information. If uncertain, please call the school before bringing your child. There is no tuition discount for those days on which WOODHAVEN ACADEMY is closed.

IN-HOME BABYSITTING: WOODHAVEN ACADEMY does not render child care services off of its premises. Accordingly, parent agrees not to arrange with the staff members for off premises care of their child, and in doing so is in violation of this agreement. If any staff member agrees to provide off premises care for children enrolled in WOODHAVEN ACADEMY the staff member is not acting as an employee, is in violation of our employee policies and places their continued employment in jeopardy. If such an occurrence takes place the employee may be terminated and the family may be asked to withdraw from the program.

PROGRAM ACKNOWLEDGMENT AND GENERAL AUTHORIZATION: I have reviewed the daily program and the policies of Woodhaven Academy. We hereby grant to Woodhaven Academy permission for the above named child to:

- a. Take part in all program activities, including the use of indoor and outdoor equipment;
- b. Be photographed or videotaped in connection with the daily program activities;
- c. Participate in water-related activities supervised by WOODHAVEN ACADEMY;
- d. Be transported by WOODHAVEN ACADEMY to and from the elementary school where this child attends if applicable.

COMMUNICATION: Communication is one of the most important aspects in your child’s care and education. Respect and open communication is of utmost importance in our environment. Our open door policy encourages families to discuss any situation with the Director at any time at the school. The Director is also available by phone and e-mail.

MEALS: Nutritious meals are prepared on-site by a cook with food preparation, food service, and nutrition training. A morning “breakfast snack”, hot lunch, and an afternoon snack will be served daily. All meals components and portions meet and exceed USDA requirements.

PERSONAL BELONGINGS: Children may not bring toys, food, or money into the school. Our toys and equipment have been carefully selected to provide a safe and stimulating environment and they are shared by all children. Personal items are not to be brought from home unless it is specifically requested by the school or by your child’s teacher for a project, learning activity, or a special event. Please choose those items wisely and keep in mind, Woodhaven Academy cannot be responsible for loss or damage of personal belongings.

INITIALS OF PARENT _____

HEALTH INFORMATION & MEDICAL AUTHORIZATION

MEDICAL AUTHORIZATION: I hereby grant WOODHAVEN ACADEMY permission to take whatever action in its judgment may be necessary in supplying emergency medical or dental services to my child. I understand that, consistent with the circumstances of the situation and the available time, WOODHAVEN ACADEMY will attempt to contact and follow the instructions of the parent, physician, or other person(s) designated by me below. In the event WOODHAVEN ACADEMY is unable to do so, I grant permission to WOODHAVEN ACADEMY to contact and comply with the advice of an available physician, ambulance personnel, or emergency room personnel.

I hereby agree that I will be solely responsible for and will promptly pay any and all expenses, which may be incurred by WOODHAVEN ACADEMY in making emergency medical treatment available to my child.

ILLNESS POLICY: Children who appear ill or show evidence of illness may not remain at the school. If the child has such symptoms and is present at WOODHAVEN ACADEMY, the parents will be required to pick him/her up as soon as possible but no longer than ninety (90) minutes from initial contact with the parent. Children must be without fever for 24 hours without the use of any fever reducing medication before returning to the school. These requirements are imposed by Child Care Licensing and are intended for the protection of all the children. Please see the detailed "Illness Policy" in our Parent Handbook.

IMMUNZATIONS: In order to comply with the state law, parents are required to supply WOODHAVEN ACADEMY with an immunization report (Form 3231) within 30 days of enrollment. Regular updated reports will be required as they are due.

ALLERGIES: Woodhaven Academy requires a written statement from the child's physician regarding allergies that require modification of the daily schedule. This statement will be kept in the child's file. Annual updates may be required. For the safety of the children, Allergy Lists will be posted in each classroom as well as in the kitchen unless otherwise specified in writing.

List all known allergies. Indicate "none known" if applicable. _____

HEALTH CONDITIONS: Please describe any health or other special situations of which WOODHAVEN ACADEMY should be aware and which would require special procedures to be followed concerning this child such as physical or mental conditions, existing or pre-existing illnesses, operations or hospitalizations, or any dietary restrictions. If any conditions are present, a written statement from the physician and/or specialists will be required and kept on file.

Please indicate "none known" if applicable. _____

MEDICATION: Woodhaven Academy will administer medication upon written authorization by the parent and the child's physician. Medications are administered at **11:00 a.m.** and **3:00 p.m.** only. The Weekly Medication Form must be completed, signed, dated, and delivered to the Director with the medication. Medications without an appropriate form or with incomplete forms will not be administered. Woodhaven Academy will administer prescription medications, as prescribed, if the prescription calls for more than two doses per day. Woodhaven Academy will only administer over-the-counter medications that are accompanied by a letter from the child's physician. The letter must state the name of the over-the-counter medication, the dosage, and the reason for the medication to be given. Refer to the parent handbook for the detailed "Medication Policy".

STATE LAW REQUIRES THAT ALL MEDICATIONS MUST BE: a) In the original container; b) Clearly labeled with the name of the medicine; c) Clearly labeled with the child's first & last names; d) Labeled with a prescription number; e) Clearly labeled with the dosage to be administered; and f) Clearly labeled with the date.

I hereby agree that I will be solely responsible for and will promptly pay any and all expenses, which may be incurred by WOODHAVEN ACADEMY in making emergency medical treatment available to my child.

Physician's Name / Group Name			Phone #	
Street Address		City	State	Zip Code
Insurance Provider	Policy #	Name of Policy Holder	Description of Coverage	

INITIALS OF PARENT _____

RELEASE AND EMERGENCY

RELEASE AUTHORIZATION: Under no circumstances will WOODHAVEN ACADEMY release this child to anyone other than the parents or those identified below. Management must have received a written authorization from the parent in order for any other person to pick up the child. Additions or changes to the list of persons appearing below will be made, signed, and dated on this form or shall be attached. The parent agrees in each instance that he/she will check the child in and out on the automated system and make certain staff is aware of the child's arrival and departure. The parent further agrees to escort this child into or out of the school when dropping off or picking up. WOODHAVEN ACADEMY will not allow any child to enter or leave without an adult escort.

If there are custodial rights, visitation limits or other legal circumstances concerning your child or family, a copy of the court document must be kept in the child's file.

Please indicate those circumstances or indicate "none known" if applicable. _____

Name	Relationship to Parent/ Child	Home Phone #	Cell Phone #	
Address	City	State	Zip Code	

Name	Relationship to Parent/ Child	Home Phone #	Cell Phone #	
Address	City	State	Zip Code	

EMERGENCY RELEASE: List at least two (2) persons, other than parents, who WOODHAVEN ACADEMY is authorized to contact for guidance in an emergency, such as a medical, dental or other emergency, when this child's parents are unavailable. These contacts may or may not be the same as above.

Name	Relationship to Parent/ Child	Home Phone #	Cell Phone #
Address	City	State	Zip Code

Name	Relationship to Parent/ Child	Home Phone #	Cell Phone #
Address	City	State	Zip Code

INITIALS OF PARENT _____

FINANCIAL POLICIES & AGREEMENT

REGISTRATION FEES: An Initial Registration Fee of one hundred dollars (\$100.00) shall be paid for the first child at the time of enrollment along with sixty dollars (\$60.00) for each additional child. An Annual Renewal Registration Fee shall be charged for each child each year thereafter, and shall be due and payable at the beginning of each school year. Registration Fees are non-refundable and are not subject to prorating. If at any time enrollment and payment of tuition is suspended, an Initial Registration fee will be due prior to re-enrollment. Re-enrollment will be based on availability of space, and an additional registration fee will be required.

TUITION: Our tuition is based on an annual amount and deduction made for holidays and school closings. Tuition is payable weekly or monthly. Payments are due each Monday by 7:00p.m. Our general policy is to adjust our fees annually, if necessary. Parents will receive at least a month's notice, in writing, of any fee adjustment.

The parent agrees to pay the weekly tuition fee in the amount of \$_____ in advance, on or before 7:00 p.m. each Monday. Monthly payments are charged and due on the first Monday of each month.

We do accept CAPS payment, however, families are completely responsible for ensuring that documentation is on file, that updates are received, and that there is no lapse in service. Families are responsible for the Parent Fee as listed on the CAPS form as well as the remainder of the amount to equal the full tuition for each child.

METHODS OF PAYMENT: Forms of payments accepted include checks, cash, money orders, and credit cards (except American Express).

LATE CHARGES AND PENALTIES: All Registration Fees and Tuition Payments are considered late after Monday at 7:00 P.M. of the week they are due. A late charge of twenty dollars (\$20.00) will be automatically added to the charges due for that week and for each week thereafter that a balance is carried forward. Enrollment may be terminated if the account is more than one week past due.

- A Late Pick-Up Fee of one dollar (\$1.00) per minute per child is charged for every minute after 7:00 p.m. that each child remains on the premises. This fee is due at the time the child is picked up.
- A thirty-five dollar (\$35.00) non-sufficient funds fee (NSF) will be assessed for every check returned to Woodhaven Academy by the bank. The Director may then require credit card or cash payments for the remainder of the enrollment period.

PAYMENT FOR EXTRA-CURRICULAR ACTIVITIES: Woodhaven Academy offers extra-curricular activities such as gymnastics, dance, and sports. Payment arrangements for these activities are made directly with the vendor. If the Woodhaven Academy tuition account is past due, enrollment in extra-curricular activities is not permitted and will be suspended or terminated.

ABSENCES AND VACATIONS: Tuition and other fees must be paid in full without deduction for absences of any duration or for any cause, and without substitution of any other days of attendance as "make-up" days. Notice of planned absence and payment is due prior to the absence. However, when a child is absent for at least one full week (Monday through Friday consecutively), an exception will apply providing the proper procedure is followed as described below. This *exception* to this policy shall be limited to two weeks during each calendar year.

A. PLANNED ABSENCE/VACATION: The parent shall give written notification to the Director in advance of the child's planned absence or vacation. In addition, an advanced payment equal to one-half (1/2) of the regular tuition shall accompany such notification. If either, advance notice or advance payment, is not received, the full tuition and applicable charges will be due.

B. ILLNESS: In most situations, the parent will not be able to give the Director advance notice of the child's illness, therefore credit will be given the week following the extended illness. On the Monday following the absence, the parent's account will be credited one-half (1/2) of the regular tuition for that current week. In order to receive this credit, the full tuition must be paid, on time, the week the child is absent.

This *exception* to the policy concerning "Absences and Vacations" shall be limited to two (2) weeks during each calendar year.

WITHDRAWALS: The obligation for full payment of tuition and other fees will continue until the date indicated by the parent. The parent agrees to furnish Woodhaven Academy with at least two (2) weeks advance written notice of such date of withdrawal. If the parent fails to provide written notice, the parent remains responsible for the full tuition for the two (2) weeks after the child's last day of attendance plus any late charges and/or penalties which shall accrue until full payment is received.

ENROLLMENT AGREEMENT: I have specifically reviewed each of the provisions of this Enrollment Application and Contract, including the Financial Policies & Agreement, and hereby agree to comply with all provisions hereof. I have read Woodhaven Academy's Parent Handbook and hereby agree to comply with all provisions within.

Signature of Parent

Date

Signature of Director

Date