

App Rec'd _____

Date pd _____
Ck# _____
Cash _____
Credit Card _____

ENROLLMENT APPLICATION 2010-2011

Please check one: Full day _____ Half day _____

THE CREATIVE LEARNING CENTER
A Christian Pre-school and Day Care, Ages 12mos.(walking)-5yrs.
Monday – Friday
7:15am -5:30pm
(706) 782-1567

Child's Name _____ Boy _____ Girl _____
(Circle preferred name)

Date of birth _____ Age as of September 1, 2010 _____

Home address: _____ Home telephone # _____
Street name and number

City State Zip Code

Mailing address (if different from above) _____

Mother's Name _____ E-Mail _____

Mother's Home Address (if different from child's) _____

Mother's phone numbers (h) _____ (w) _____ (cell) _____

Mother's Employer _____ address _____

Father's Name _____ E-Mail _____

Father's Home Address (if different from child's) _____

Father's phone numbers (h) _____ (w) _____ (cell) _____

Father's Employer _____ address _____

Child's living arrangements: () both parents () mother () father () other

If other please explain: _____

Child's Legal Guardian(s) () both parents () mother () father () other

Your child may be released to the person(s) signing this agreement or to the following:

| Name | Complete Address | Telephone |
|------|------------------|-----------|
| | | |
| | | |
| | | |
| | | |
| | | |

Other children in the family:

Name & age _____

Child's latest immunization record must be submitted by open house.

Persons to contact in the case of an emergency when parents cannot be reached:

| Name | Phone number | Relationship |
|-------|--------------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Child's primary health source (name, address and phone number):

My child has the following special needs or requires the following special accommodations: _____

My child is currently on medication(s) for long-term use and/or has the following pre-existing illness, allergies or health concerns:

Child's special interests: (art, music, reading, etc)

Has your child ever been in a pre-school or child care setting before? Yes No

What would you like for your child to gain by attending the Creative Learning Center?

Family church (denomination) preference: _____

Church member: yes no active inactive

Where? _____

Are you interested in finding a church home? _____

Vehicle Emergency Medical Information

Child's name _____ Date of birth _____

Address _____

Father's name _____

Home phone _____ Work phone _____

Mother's name _____

Home phone _____ Work phone _____

Person to notify in an emergency and parents cannot be reached:

Name _____ Phone _____

Child's doctor _____ Phone _____

Medical facility the center uses Mountain Lakes Medical Center

Address 196 Ridgecrest Circle Clayton GA 30525 706-782-3100

Child's Allergies _____

Current prescribed medication _____

Child's special needs and conditions _____

In the event of an emergency involving my child, and if Creative Learning Center cannot get in touch with me, I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred during the treatment of my child.

Child's name _____

Signature (Parent/Guardian) _____

Witness By _____ Date _____

PARENTAL AGREEMENTS WITH THE CREATIVE LEARNING CENTER

1. The Creative Learning Center agrees to provide child care for _____
Name child is called

I wish my child to be full day _____ half day _____

My child will attend:

- _____ Five days per week
- _____ Three days per week (M, W, F)
- _____ Two days per week (T, TH)

Hours:

From _____ AM to _____ PM

Months:

- _____ August- May
- _____ August- July

I understand that half-day hours are from 8:00 AM to 12:00 Noon and that full-day students attend between the hours of 7:15 AM and 5:30 PM. I acknowledge that, if my child is a half-day student, I must pick him/her up before lunch is served (12:00), unless paying for lunches, then pickup is 12:15 PM. I understand that both half-day and full-day parents will be charged a **\$1.00 per minute late pick-up fee** and a **\$30.00 late tuition payment fee** (see parent handbook for details).

The Creative Learning Center will provide a breakfast, lunch, and afternoon snack. My child will participate in the following meal plan (circle any that apply).

Breakfast Lunch Afternoon snack

2. Before any medication is dispensed to my child, I will provide a written authorization, which includes: date, name of child, name of medication, prescription number, dosage and time to be given. Medicine will be in the original container with my child's name marked on it. We only give medications at **12 NOON**.
3. My child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or facility personnel.
4. I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur such as telephone numbers, work location, emergency contacts, child's health care provider, child's health status and immunization records, etc.
5. The Creative Learning Center agrees to keep me informed of any incidents, including illnesses, injuries, adverse reactions to medication, exposure to communicable diseases, which include my child.
6. The Creative Learning Center agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water related activities occurring in water that is more than 2 feet deep
7. I have received a copy and agree to abide by the policies and procedures for the Creative Learning Center.

Signature (Parent/Guardian) _____ Date _____

Signature (CLC Director) _____ Date _____

Fees and tuition

There is a registration fee of \$125.00 per child. The fee must accompany your child’s application to ensure placement in our program. The registration fee provides insurance and supplies for the operation of the pre-school year and is non-refundable.

Tuition is due the first of each month. There will be a payment grace period of 5 days. All accounts that have not been paid by the 5th of each month will be charged a late fee of \$30.00. If payment has not been received by the 10th, your child will not be allowed to return to school until payment is received. If payment has not been received by the 15th of the month, your child’s spot in the preschool program will be forfeited and filled with a child from our waiting list.

Payments may be made by cash, check, or credit card. Checks should be made out to the Creative Learning Center or CLC.

*Monthly tuition is as follows:

| | | | |
|---------------------------|----------|---------------------------|----------|
| Half day students: | | Full day students: | |
| 2 days a week (TU/TH) | \$220.00 | 2 days a week (TU/TH) | \$330.00 |
| 3 days a week (M, W, F) | \$235.00 | 3 days a week (M, W, F) | \$372.00 |
| 5 days a week | \$250.00 | 5 days a week | \$450.00 |

After School :Monthly tuition: \$185.00
Registration fee: \$85.00

These monthly rates are based on the average number of weeks that the school will be open each month. The average number of weeks is 4.16 weeks per month for children who attend 12 months and 4.2 weeks for children who attend 10 months. Holidays and school breaks have already been taken into consideration.

The Creative Learning Center is a non-profit organization. Your child’s tuition pays the teachers’ salaries. We hire our teachers based on the number of children enrolled in the program. Your monthly tuition reserves your child’s spot, therefore we cannot subtract weeks from your tuition if you choose to go on vacation or if your child is temporally ill. We must pay teachers regardless of the days your child is out or the school is closed due to bad weather, consequently tuition is the same every month.

If you have more than one child attending 5 Full Days, your second child and each child thereafter will receive a 15% discount.

If your child is enrolled for two or three days per week, you are only allowed to bring him/her on the days he/she is registered. Due to the capacity of our classrooms and staff/child ratios, we cannot provide make-up days.

***These fees are current for the 10/11 school year and are subject to change-Thank You!**