# BAINBRIDGE CHILDREN’S CENTER 2018/2019

**Bainbridge Island Child Care Centers Since 1974 Non-Profit Organization**

## ENROLLMENT AND PERMISSION TO PARTICIPATE IN CENTER ACTIVITIES

### Child’s Name Date of Birth:

☐M ☐F

Parents/Guardian’s Name/s:

Address:

Home Phone:( )

Work: ( )

Cell: ( )

Email Address:

**Enrollment Fees: *NEW Students****:* Include a **$50.00** non-refundable enrollment fee & a non-refundable deposit **equal to** ½ of one months’ tuition **to be applied to the last months’ tuition.**

### **Returning Students:** Please include a **$50.00** non-refundable annual enrollment fee for returning students. (The previous ½ months deposit is held, to be applied to the last months’ tuition.)

**$50.00 + Deposit $ = Total $**

***ONE FULL MONTHS’ advance notice is required for cancellation.***

## Space is reserved upon receipt of payment. Enrollment priority is per Board of Directors’ policies.

1. I grant permission for my child to use all of the program equipment and participate fully in all activities.
2. I grant permission for my child to leave the center premises under staff supervision for neighborhood walks/ trips. I will be notified in advance with details regarding field trips or if van/vehicle transportation is used.
3. Unless crossed out and initialed specifically, I grant permission for my child and his/her image and voice to be included in any and all**:**

* Certifications, evaluations, studies, projects connected with the Center’s program**;**
* Center-related electronic images, photographs**,** or videos used for staff training/workshops, advertising**,** electronic presence and public relations (Facebook, BICCC website, etc.); and
* The Center Directory, which lists family name, child’s name, address, phone number and e-mail.

##### I have read & understood the fee schedule, policies & procedures outlined in the BI-Child Care Centers’ Parent Handbook and the Disaster/Emergency Preparedness Plan, and been provided an opportunity to request clarification of these policies.

1. **I have completed a current Emergency & Health Form and updated the Immunization Form for my child*.***

##### I agree to pay monthly tuition and fees due on the eleventh of the month in which services are provided.

1. **I agree to wash laundry two (2) times during the year & receive credit (2x$10) toward my Maintenance Fee.**

##### I agree to perform four (4) hours of volunteer maintenance work for the Center. I will sign up using the Parent Volunteer Coupons due by September 30th for a minimum of four hours of work.

1. **I agree to provide a change of clothing, rest blanket & appropriate seasonal clothing for my child. I understand that I may be liable for reimbursement for use of the center’s clothing & bedding.**
2. **I understand that registration is not complete until all necessary paperwork is turned in with the registration fee and any past due balances, if applicable, have been paid.**

## Parent/Guardian Signature: Date:

Date Received: Rec’d by: Ck# Amt: Schedule Sent: Confirmation Rec’d: Forms Complete-- Emergency: Health History: Social History: Immunizations: FT:

## Child’s Name:

**Birth Date: M**☐ **F**☐ **Ethnicity** (optional)

1. **Check one ☐*Returning*** Re-Start Date:

☐***New Enrollment*** Start Date:

# Check the days your child will attend:

**☐Monday ☐Tuesday ☐Wednesday ☐Thursday ☐Friday**

**Approximate time of attendance: a.m. to p.m.**

1. **Choose a Schedule:**
   * **Full Time Plus** (Over 10 Hours per Day)
   * **Full Time** (7-10 Hours per Day)
   * **Three-Quarter** (5-7 Hours per Day)
   * **Part Time (**Starts at 8:30 am. & Ends by 12:30 pm.)

# Will your child attend Kindergarten in September 2019?

**☐Yes** or ☐**No**

#### Alternate schedules are available as space permits with permission of the Center Director.

*Extended Care may be available at an additional charge of $7.50/hr as space permits when care beyond the regular schedule is needed.*