

BIG KIDS/Kids Club Fall Registration School Year <u>2022-2</u> Bainbridge Island Child Care Centers Since 1974 Non-Profit Organization

ENROLLMENT AND PERMISSION TO PARTICIPATE IN CENTER ACTIVITIES

4	ands on → Heads of		
Ch	ild's Name	Date of Birth:	□M □F
Pa	rents/Guardian's Name/s:		
Ad	dress:		
Hor	me Phone:() Work: ()	Cell: ()	
Emai	il Address:		
	Enrollment Fee: Please include a \$25.00 non-refundable <i>an</i> separate enrollment fee will be charged for Summer.	nual Fall Enrollment processing for	ee. Please note, a
	Transportation : Parents must inform the child's school that school year for bus transportation.	they plan to use Big Kids for chil	dcare during the
	During the School Year credit is not given for vacation, holi	days, staff in-service, illness, abse	nce or retroactively.
	Enrollment priority is per Board of Directors' policies.		
1.	I grant permission for my child to use all of the program Bainbridge Island Big Kids/Kids Club Programs. I grant permission for my child to leave the center premises field trips in an authorized vehicle. I understand that I will and must grant permission for each separate trip.	s under staff supervision for neighb	orhood walks or for
3.	 Unless crossed out and initialed specifically, I grant permincluded in any and all: Certifications, evaluations, studies and projects connected. Center-related electronic images, photographs, or vide electronic presence (Facebook, BICCC website, etc.) a The Center Directory, which lists family name, child's 	ted with the Center's program; os used for staff training/workshound public relations; and	os, advertising,
4.	I have read & understood the fee schedule, policies & Care Centers' Parent Handbook and the Disaster/Emopportunity to request clarification of these policies.	_	_
5.	I have completed the annual Emergency & Health Form and	updated the <u>Immunization Form</u> f	or my child.
6.	I agree to pay monthly tuition and fees due on the first	of the month in which services an	e provided.
7.	I understand that registration is not complete until all ne- fee and any past due balances, if applicable, have been pa	v 1 1	ith the registration
	*** If there is more than one payee, each payee m	ust submit a separate enrollment form	***
	***Indicate your child's schedule Thank You for enrolling your child! A confirm		
Pa	arent's Signature:	Date:	
]	Date Received: Rec'd by: Ck# Amt:	Schedule Sent: Confirma	tion Rec'd:

Forms Complete-- Emergency: ____ Health History: ____ Social History: ____ Immunizations: ____ FT: ____

(Child's Name:								
Birth Date:				$M\square$ $F\square$		Ethnicity (optional)			
1.	Check one □ Returning		g	Restart Date:					
		□New Enrollment							
2.	Choose Grade	□Kinder	□1 st	$\Box 2^{ ext{nd}}$	$\Box 3^{ ext{rd}}$	□4 th	□5 th	□ 6 th	
3.	What school does your child attend? □Ordway □Blakely			lyssey	/ssey		□Sakai		
			□Wilkes						
□Other:									
4.	Choose which schedule:								
	\square Before School Only **Before School Only does not include Non-School Days & Holidays.								
☐ Before and After School									
	☐ After School Only								
$_{\square}$ Drop In Only (2 hour minimum) As space permits with approval of program director.									
5. Choose days attending:									
	□Monday	□Tuesday	□We	dnesday	□Thu	ırsday	□Fri	day	
	 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 								

Fall Paperwork is DUE in by August 1, 2022
Fall Paperwork must be <u>CONFIRMED</u> by August 12, 2022.
Enroll will open to the public as of August 15, 2022

schedule is needed.