

ABC WEE SCHOOL Enrollment Form Summer Program 2010
Christ United Methodist Church

Enrollment Fees due with Enrollment Form

Child's Name: _____ Date of Birth: _____ Child's Home Telephone #: _____

List Telephone numbers where Mother's # _____ Father's # _____ Guardian's # _____

Parents/ guardians can be reached during WEE School hours:

Child's Address: _____

Date of Admission: _____ Date of Withdrawal: _____

What is the best way to contact you (phone, e-mail, etc.)? _____

Guardian's Address (if different from children): _____

Family e-mail address: _____

Name, Address & Phone # of person to call in case of emergency if parents/ guardians cannot be reached:

Relationship to child:

I hereby give WEE School permission to allow my child to leave the facility ONLY with the following person(s): (name/ phone # & driver's license #) _____

Check all that Apply:

1. WATER ACTIVITIES: I hereby give do not give my consent for my child to participate in water activities:

 sprinkler play wading pools water table play big pools

2. _RECEIPT OF WRITTEN OPERATIONAL POLICIES (see parent's handbook)

I have read and understand the WEE School Parent Handbook from www.abcweeschool.com

Signature– Parent or Legal Guardian

FAMILY INFORMATION:

Siblings

Name _____ M F Age _____ WEE School student? _____

Name _____ M F Age _____ WEE School student? _____

Name _____ M F Age _____ WEE School student? _____

Pet's _____ Favorite Toy/ Activity _____

Other Information about your child (special needs/ allergies/ etc.): _____

Mother's Employer: _____

Father's Employer: _____

Church you currently attend: _____

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:

In case of emergency, I give my consent to WEE School personnel to seek any and all necessary medical treatment for my child, _____. In the event that a doctor is required, I prefer that Dr. _____ be called at _____ . In the event that medical treatment is needed, I prefer that it be sought at _____ hospital. I understand that a conscientious effort will be made to locate me before any action is taken.

(Signature of parent)

Mother's Name: _____

Father's Name: _____

WEE School Parent Agreement

The following conditions involving the care of are understood and

(Child's name- please print)

Agreed upon between Christ United Methodist Church WEE School and

Parent- please print)

THE SCHOOL AGREES THAT:

1. In return for the sum, which the parent agrees to pay, WEE School will give regular care to the above named child from 9:30 am to 2:00 pm for two days a week during the traditional school calendar year, except for Ft. Worth/Crowley Independent School District holidays and school closings.
2. Your child's teacher(s) will examine the children daily for contagious diseases or illnesses before they are admitted for the day. The child cannot be admitted until free of fever, vomiting, diarrhea or rash for 24 hours. The child will be sent home if he/she has any signs of fever, vomiting, diarrhea or rash.
3. WEE School will exercise reasonable care and judgment in all matters related to the safety and welfare of the child.
4. In case of accident or illness to the child, the worker will promptly take such reasonable measures, as are in his/her judgment, in the best interest of the child and will notify the parents as soon as possible.
5. WEE School will provide physical care and emotional, social and mental development opportunities in a group situation.
6. WEE School will not release the child to anyone other than the parent or guardian without authorization from the parent.
7. WEE School will try to provide materials, toys and equipment in sufficient quantity to allow for a variety of play and learning activities during the day.

THE PARENT AGREES THAT:

1. The parent will pay WEE School in advance on the first day of WEE School each month (no later than the 10th of the month). Regular care shall be given to the above named child from 9:30 am to 2:00 pm, two days a week during the traditional school calendar year, with

the exception of FWISD/CISD school holidays and school closings. Responsibility for payment on time is that of the parent who signs the entrance agreement form.

2. It is not the responsibility of WEE School to collect late tuition. If the parent or guardian sees the tuition or fee cannot be paid on time, it is the responsibility of the parent or guardian to make acceptable arrangements for the delayed payment with the Director before the payment is due. If acceptable arrangement for payment has not been made by the 10th of the month, a \$10.00 late charge will be assessed.

I understand and agree to abide by the guidelines on this page:

Parent / guardian signature date

3. The parent will pay a non-refundable enrollment fee of \$30.00 for each child, payable at the time of application. The child is not considered a student at WEE School until the enrollment fee has been paid and all forms are submitted and accepted by the WEE School Director.

4. The parent or guardian will pay a supply fee of \$30.00 for each child registered.

5. WEE School operating hours is 9:30 am to 2:00pm, Monday and Wednesday. Parents who are late picking up their child will be charged \$5 for every 5 minutes late. Children may be taken to the classroom at 9:25 am.

6. In case of illness or accident and a parent or guardian cannot be contacted by the WEE School staff, and in the judgment of the director the illness or accident requires a physician,

Dr. _____ may be called at (phone #)

_____ at the expense of the parent.

7. The parent will notify WEE School if the child has a contagious illness. The child will not be allowed to return to school until all danger of contagion is past. The child must be free of fever, vomiting, diarrhea or rash for 24 hours before returning to WEE School. In some cases, siblings may be required to remain at home as well.

8. In all emergencies, WEE School has my permission to take such reasonable measures as are, in the judgment of the worker, necessary for the safety and welfare of the child.

9. WEE School reserves the privilege of dismissal of any child if, after entering, he/she is unable to participate in group experiences.

10. Two weeks written notice should be provided when the child is to be withdrawn by the parent or guardian. Payment of tuition continues through this time period.

11. Christ United Methodist Church and the Wee School program have permission to use my child's/children's photos in brochures and on the Christ United Methodist Church website.

(child's/children's name(s) or personal information will not be included in these publications)

I understand and agree to abide by the guidelines outlined in the WEE School Parent Agreement.

Parent / guardian signature

date

Authorized signature of WEE School

date