



The Calvary

A C A D E M Y

**Childcare/PreSchool
Enrollment
Packet**



Dear Parents/Guardians:

I would like to personally welcome you to The Calvary Academy Childcare and Preschool. We are excited you are joining us, and we look forward to getting to know you and serving your family. We hope that you feel welcomed. We are dedicated to developing your child's heart and mind in preparation for a life-long pursuit of loving, learning, living, and leading. Our goal is also that your child feels exceptionally loved and has fun being here in a Christ-centered environment. As we partner with you, please feel free to share and discuss any questions that you may have. We are very excited to welcome you to the TCA Childcare and Preschool family! We are here to help in any way we can, and we hope to be a resource for your family.

Attached is our enrollment packet. The state of Ohio requires many forms to be filled out since we are a state-licensed facility. Please complete all the required forms.

Serving God's Children,
Sarah Powell
Director and Preschool Principal

The Calvary Academy Childcare and PreSchool

Financial Policy Agreement

I/We, _____ / _____
the parents/guardians of _____, have read and understand
The Calvary Academy Childcare and PreSchool Financial Policy as stated in the handbook and
the registration forms.

I/We agree to abide by the Financial Policy of The Calvary Academy Childcare and PreSchool.

I/We understand that Procure is the data management system used by The Calvary Academy
Childcare and PreSchool and that I/we will be required to set up a profile on Procure and pay fees
and tuition through Procure.

Withdrawal

Two weeks written notice of withdrawal is requested. The child's account will continue to be billed
until written notice of withdrawal is given to the director. If a child does not attend for a two-week
period and the parent/guardian has not submitted written notification of withdrawal, the child will
be considered to be withdrawn at the end of that two-week period and charges will continue to
accrue during that two-week period.

Credit Days

As long as The Calvary Academy Childcare and PreSchool chooses to offer credit days, no credits
will be applied to any account without a written Credit Slip submitted to the director. All Credit
Slips must be turned in prior to the absence, the week of the absence, or the first day the child
returns to TCACP following the absence. Any credits requested after that will not be accepted.
Credit Days may only be applied to days a child is absent from TCACP and are available for use
only by families paying full-time rates after attending three (3) consecutive months. The Calvary
Academy Childcare and PreSchool retains the right to discontinue the use of Credit Days at any
time.

I/We have read and understand The Calvary Academy Childcare and PreSchool Handbook,
including the information on withdrawal notification and credit days, and I/we agree to abide by
the policies stated therein.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Emergency Medical Information
The Calvary Academy Childcare and PreSchool

Child's Name _____ Date Completed _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ D.O.B. _____ ()Male/()Female

Mother's Name _____

Place of Employment _____

Home Phone _____ Work _____ Cell _____

Father's Name _____

Place of Employment _____

Home Phone _____ Work _____ Cell _____

Child lives with: Mother _____ Father _____ Both _____ Guardian _____

Physician/Pediatrician _____ Phone: _____

Address _____

City _____ State _____ Zip _____

Dentist _____ Phone: _____

Address _____

City _____ State _____ Zip _____

I hereby authorize the following adults to pick up my child from The Calvary Academy Childcare and PreSchool Center:

(Please include **yourself and parent** not completing form, as well as **both emergency contacts!!**)

Over 18 years of age:

1. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

2. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

3. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

4. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

5. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

6. _____ Relationship _____ Y N

Home Phone _____ Work _____ Cell _____

Parent Signature _____

Date _____

Enrollment Date: _____

Mother: E-Mail Address: _____ Phone Number: _____

Father: E-Mail Address: _____ Phone Number: _____

Would you like to receive email from the Center, which includes but is not limited to, weather or emergency alerts, statements, newsletters, reminders about important information, and surveys?

____yes ____no

Mother's Social Security #: _____ Father's Social Security# _____

Allergies of any kind? _____

Any special health conditions: _____

Additional comments: _____

I authorize The Calvary Academy Childcare and PreSchool Center to post information regarding my child's allergies in the building to alert personnel about his or her condition.

Signature

Date

Schedule: Monday Tuesday Wednesday Thursday Friday (Please circle days attending)

Hours: _____

Phonevite Automated Parent Notification Service:

Allows contact to parents within minutes to communicate emergency closings due to inclement weather, early releases, etc. By supplying us with your phone number, you will receive an automated phone call informing you of any closings. We do ask that if there are ever any changes in your contact information, please notify the office immediately. If you would like to sign up for Phonevite Automated Parent notifications, please fill out the information below:

Please Sign Me Up _____ Do Not Sign Me Up _____

NAME: _____

Home () _____

Cell () _____

Other () _____

Other () _____

*By filling out this information, you give permission to receive group calls.

I understand that periodically TCA Childcare and Preschool will use pictures taken of their students without their names in TCA publications including the website, social media or promotional materials.

(check only if you DO NOT want your child's photo used.)

____ No, do not use my child's photo on any materials.

VERIFICATION OF PARENT/GUARDIAN REVIEW AND RECEIPT OF CENTER POLICIES AND PROCEDURES: Appendix 5101:2-12-07

Center Parent Information

The center is licensed to operate legally by the Ohio Department of Job and Family Services (ODJFS). This license is posted in a noticeable place for review.

A toll-free telephone number is listed on the center's license and may be used to report a suspected violation of the licensing law or administrative rules. The licensing rules governing childcare are available for review at the center.

The administrator and each employee of the center is required, under Section 2151.421 of the Ohio Revised Code, to report their suspicions of child abuse or child neglect to the local public children's services agency.

Any parent of a child enrolled in the center shall be permitted unlimited access to the center during all hours of operation for the purpose of contacting their children, evaluating the care provided by the center or evaluating the premises. Upon entering the premises, the parent, or guardian shall notify the Administrator of his/her presence.

The administrator's hours of availability to meet with parents and child/staff ratios are posted in a noticeable place in the center for review.

The licensing record, including licensing inspection reports, complaint investigation reports, and evaluation forms from the building and fire departments, is available for review upon written request from the Ohio department of job and family services.

It is unlawful for the center to discriminate in the enrollment of children upon the basis of race, color, religion, sex, disability, or national origin in violation of the Americans with Disabilities Act of 1990, 104 Stat. 32, 42 U.S.C. 12101 et seq.

For more information about childcare licensing requirements as well as how to apply for child care assistance, Medicaid health screenings and early intervention services for your child, please visit <http://jfs.ohio.gov/cdc/families.stm>.

Parent Handbook to include the following information:

General Information

1. Center name, address, email address and telephone number.
2. Description of the center's program philosophy.
3. Days and hours of operation, scheduled closings and basic daily schedule.
4. Staff/child ratios and group size.
5. Meals and snacks provided.
6. Outdoor play, including limitations placed on outdoor play due to weather or safety issues. Considerations may include but are not limited to temperature, humidity, wind chill, ozone levels, pollen count, lightning, rain or ice.
7. Opportunities for parent involvement in center activities.
8. Opportunities for parents to meet with teachers regarding their child.
9. Payment schedule, overtime charges and registration fees as applicable.
10. Programs shall have a policy in place describing supports for onsite breastfeeding or pumping for mothers who wish to do so (if the program serves infants or toddlers).

Center Policies and Procedures

1. Enrollment including required enrollment information.
2. Care of children without immunizations.
3. Attendance including procedures for arrival and departure, the program's absent day policy, releasing child to people other than the parent, releasing a child according to a custody agreement and follow up when a child scheduled to arrive from another program or activity does not arrive.
4. Supervision and child guidance.
5. Parent provided food and center-wide dietary policy, if applicable. If all of the food is parent provided, the policy shall also include if the center supplements food when the parent does not provide sufficient food for the day.
6. Management of illness including isolation precautions, symptoms for discharge and return and notification of parent of ill child.
7. Summary of procedures taken in the event of an emergency, serious illness or injury.
8. Administration of medication including food supplements, modified diets and whether school age children are permitted to carry their own medication and ointments.
9. Transportation for trips and emergencies.
10. Water activities/swimming.
11. Infant care, if applicable, including frequency of diaper checks.
12. Napping and Resting.
13. Evening and overnight care, if applicable.
14. Policy on operation and/or closing due to weather, school delays or closings and any other factors.
15. Policy on when the center will require disenrollment of a child.
16. Procedure for parents or employees to follow when needing assistance in resolving problems related to the child care center.
17. Policy on whether or not the center will provide child care services to children whose parents refuse to grant consent for transportation to the source of emergency treatment.
18. Policy on whether the program conducts formal assessments on enrolled children and if the program reports child level data to ODJFS pursuant to Chapter 5101:2-17 of the Administrative Code.

Parent/Guardian Name (print) _____

Parent/Guardian signature _____ **Date** _____