



Student Application

For Office Use Only

Date of Application: _____ Start Date: _____ Days: M T W TH F
Arrival/ Departure Times: _____ Room Assignment: _____
Weekly Tuition: \$ _____ Registration: \$ _____ Date of Payment: _____
CCDF: Yes / No Allergies/Medications: _____ Custody: _____

I am interested in enrolling my child, _____ in PromiseLand Child Care and

Tuition Rates:	<u>Full Time</u>
Infants:	\$411.00
Toddlers:	\$348.00
Threes:	\$275.00
Fours:	\$275.00
Fives:	\$245.00
Spring/Summer/Fall Breaks:	\$259.00
Before & After School:	\$144.00
Before or After School:	\$52.00

Requested Start Date: _____

How did you hear about PromiseLand? _____

Do you attend The Caring Place? Yes No If No, do you attend another church? Yes No

Child Information

Child's Legal Name: Last _____ First: _____ Middle: _____

Date of Birth (M/D/YY): _____ Gender: Male / Female Race: _____

Child's Physician and/or Clinic's Name: (Include Name, Address & Phone Number)

Address: _____

City: _____ Zip Code: _____ Phone Number: _____

In case of an emergency, what hospital would you prefer your child to be transported to: _____

Emergency Contact List

In case we are unable to reach you, please list alternate emergency contacts.

Name: _____ Phone # : _____ Relationship to Student: _____

Name: _____ Phone # : _____ Relationship to Student: _____

Parent and/or Legal Guardian Information

It is important that you include any and ALL contact numbers where you can be reached

Last Name: _____ First Name: _____

Relationship to the student _____ D-O-B: _____

Address: _____ SSN: _____

City: _____ Zip Code: _____ Email: _____

Ph. Numbers: (Home) _____ (Cell) _____ (Work) _____ Ext _____

Employer: _____

Employment Address: _____ Email: _____

Last Name: _____ First Name: _____

Relationship to the student _____ D-O-B: _____

Address: _____ SSN: _____

City: _____ Zip Code: _____ Email: _____

Ph. Numbers: (Home) _____ (Cell) _____ (Work) _____ Ext _____

Employer: _____

Employment Address: _____ Email: _____

Child legally resides with Both Parents Mother Father Other (Please Explain): _____

Custody Information

Are there custody restrictions (i.e. restrictions which relate to visitation, payment, drop-off, pick-up or protection orders) or any custody information in which PromiseLand Staff should be made aware of, as it relates to this child being enrolled? Yes No

If yes, please explain below. If a valid Protection Order is in place, please attach a copy of that order with this application.

List additional people authorized to pick up your child:

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Discipline and Guidance Policy

While caring for your child, we may have to respond to your child's incorrect choices and/or unwanted behaviors. Hitting, kicking, spitting, hostile verbal behavior and other behaviors which will hurt another child or teacher are not permitted.

In response to these unwanted behaviors, we WILL NOT use:

- Threats or bribes
- Physical punishment, even if requested by the parent
- Deprivation of food or other basic needs
- Humiliation or isolation

In response to these unwanted behaviors, we WILL:

- Respect your child
- Establish clear rules
- Be consistent in enforcing rules
- Use positive language to explain desired behavior
- Speak calmly while bending down to your child's eye level
- Give clear choices
- Redirect your child to a new activity

Move your child to a safe place to allow them to reflect on their unwanted choices (this thinking time will be no longer than one minute per year of your child's age)

If your child's behavior is very disruptive or harmful to himself or other children, we will discuss the issue with you privately. If the situation can be resolved, the child may remain enrolled. If we are unable to resolve the issue, you may be asked to make other child care arrangements.

Parent/Guardian signature _____ Date: _____

Changes in Family Information

I agree to notify PromiseLand Childcare and Preschool of any changes in family phone numbers, address, work location, emergency numbers, family physicians, employment, etc.

Parent/Guardian signature: _____ Date: _____

Acknowledgement of Escorting Policies

I understand that my child must be escorted in and out of PromiseLand Childcare and Preschool. PromiseLand will not release my child to anyone whose name is NOT on the Authorized Pick-Up List.

Parent/Guardian signature _____ Date: _____

Acknowledgement of Payment Procedures

I understand that tuition is due each Friday, for the following week. If it is not paid, I understand that I will accrue a **\$5 late fee**. If tuition payments become 3 weeks delinquent, PromiseLand will suspend care until the outstanding balance has been brought down to 2 weeks or less. I am also aware that I can select Automatic Withdrawal for weekly tuition payments, at my request.

Parent/Guardian signature _____ Date: _____

Acknowledgement of Late Pick-Up Fee

I understand that PromiseLand is open from 6:30 a.m. - 5:30 p.m. If for any reason my child is not picked up by 5:30 p.m., I will be charged **\$5.00 for the first minute and \$1.00 per additional minute** until he/she is picked up. Actual "Drop-Off" time and "Pick-Up" time will be based on PromiseLand's check-in/out clock. Any late fees incurred will automatically be added to the following weeks tuition. After 5:30 p.m., staff will attempt to reach you. If they are unable to do so, those on your "authorized pick-up list" will be notified. If no one on that list can be contacted by 6:30 p.m., our staff will contact the authorities requesting their involvement.

Parent/Guardian signature _____ Date: _____

Acknowledgement of Enrollment Fee & Withdrawal Procedures

I understand PromiseLand is a twelve month, full-day child care provider, and my applicaiton fee of \$35.00 will only be refunded to me should my child attend. In addition, a two-week written notice is required to withdraw my child from the program. For any notice less than two weeks, I will be billed for two weeks of service. If a child is absent for more than two weeks with no notice from the parents,, procedures to automatically withdraw my child will begin, and I will be charged for those two weeks.

Parent/Guardian signature _____ Date: _____

Medication Policy

I acknowledge PromiseLand will only permit **Doctor Prescribed Medications**. They must come in their original container/box with the prescription attached, or a copy of the Doctor's written orders. I will be asked to fill out a *Request to Administer Medication Form* at the time it is brought in with written instructions for administration.

Parent/Guardian signature _____ Date: _____

Safe Conditions Policy

I acknowledge that the safe condition practices followed at PromiseLand are as follows:

- Children will be actively supervised with at least the minimum required number of qualified PromiseLand staff.
- All PromiseLand staff who supervise children will have completed and passed a comprehensive criminal background check, drug screen, TB test, and all required educational trainings.
- The Director will ensure that all interior and exterior surfaces (including walls, floors, ceilings, equipment, toys, furnishings, and cribs) are in a safe condition free of sharp points, jagged edges, splinters, protruding nails or wires, loose parts, rusty parts, and poisonous substances.

PromiseLand will also take the following steps to properly maintain the facility:

- Cleaning and sanitizing the rooms and common areas daily.
- Washing and sanitizing toys, furniture, and other equipment used by the children weekly and as needed because of contamination.

Parent/Guardian signature _____ Date: _____

Playground/Outside Time Policy

I acknowledge that the playground and outside time practices followed at PromiseLand are as follows:

For our outside 3's and 4's playground:

- Teachers will follow a precise entering and exiting procedure in regards to walking to and from the playground area.
- Teachers will lead the students down the hall to the South entrance of the building in order to stay within the security doors at all times.
- Once out of the building, teachers will lead students safely across the parking lot to the playground. While playing, the gate will remain closed and the students will be supervised by a teacher at all times.

For outside walks and outings:

- Teachers will ensure the safety of all students while outside by keeping children away from traffic and moving vehicles.
- Teachers will supervise the children at all times while outside and they will ensure that each child is able to enjoy the walk safely.

Parent/Guardian signature _____ Date: _____

Photo / Video Consent

By enrolling my child, I understand that my application for PromiseLand gives permission for photos of my child to be posted in their classroom and secured video of them to be accessed via webcam. By signing this form, I am giving my consent for my child's pictures/videos to be shared for school promotional use as well. For example: website, brochures, church video announcements, etc.

Please check ONE BOX only:

- I hereby give my permission for my child, _____, to be included in photos/videos for PromiseLand promotional use.
- I do not give my permission for my child, _____, to be included in photos/videos for PromiseLand promotional use.

Parent/Guardian signature _____ Date: _____

Check List for Enrollment

1. Completed application with all sections signed and dated
2. \$35 application fee (refunded only if child attends, plus your child's first week's tuition)
3. A copy of your child's immunization records
4. A copy of your child's health physical dated within 12 months of enrollment
5. A copy of your health insurance information and/or card

Upon enrollment, you will receive a Parent Handbook. Please read this handbook as it will answer many of the questions you may have. If you have additional questions, or you are in need of assistance with this application, please contact the PromiseLand office at 317-895-7721. We look forward to serving your family!

Child's Preferences & Special Needs

1. Child's full name:: _____ Child's Nickname: _____

2. Does your child have a special security item (ie: blanket, teddy bear):

3. Does your child have allergies (to insects, medications, food, etc.)? Yes No
If yes, specify:

4. Are there any special procedures required in caring for your child? Yes No
If yes, specify:

5. Does your child have any physical or developmental delays, or mental health disorders: Yes No
If yes, specify:

6. Does your child have any conditions that might limit participation in activities? Yes No
If yes, specify:

7. Please tell us any other information you would like us to know about your child that may help him/her thrive during their time here at PromiseLand:
