

ADMISSION INFORMATION

SOUTH HILLS CHRISTIAN CHURCH PRESCHOOL

Authorized Designated Pick-Up List for my child

Child's Name _____ Parents _____

I hear by authorize South Hills Christian Church Preschool to allow my child to leave the preschool **ONLY** with the following persons. (Please list ALL of the following information in order to comply with Childcare Licensing Regulations)

Name	Address	Phone	DL# (REQUIRED)

Children will only be released to a parent or person designated by the parent or guardian after verification of an ID. (Please feel free to attach copies of ID identification when possible)

Please inform all those authorized to pick up your child that SHCC Preschool will require a photocopy of a valid ID to ensure security and safety regulations.

Late fees are charged after 2:10 pm if the child is not staying for after care and are paid to the program that day when picking your child(ren) up. If your child(ren) is not picked up by 2:10 they will be taken to after care. Persons who are late picking up their child(ren) from after care will be charged \$1.00 per minute starting at 5:35 pm.

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Discipline and Guidance Policy for

Name of Operation: **South Hills Christian Church Preschool**

Discipline must be:

- (1) Individualized and consistent for each child;
- (2) Appropriate to the child's level of understanding;
- (3) Directed toward teaching the child acceptable behavior and self control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- (1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- (2) Reminding a child of behavior expectations daily by using clear, positive statements;
- (3) Redirecting behavior using positive statements; and
- (4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- (1) Corporal punishment or threats of corporal punishment;
- (2) Punishment associated with food, naps, or toilet training;
- (3) Pinching, shaking, or biting a child;
- (4) Hitting a child with a hand or instrument;
- (5) Putting anything in or on a child's mouth;
- (6) Humiliating, ridiculing, rejecting, or yelling at a child;
- (7) Subjecting a child to harsh, abusive, or profane language;
- (8) Placing a child in a locked or dark room, bathroom, or closet with the door closed;
- (9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

My signature verifies I have read and received a copy of this discipline and guidance policy.

Signature: _____

Circle one please: parent guardian relationship:

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Parent Agreement and Contract

South Hills Christian Church
Preschool
3200 Bilglade Rd., Ft Worth, TX 76133

Telephone
817-926-5281

Classroom:
Teacher:

I, _____ agree that my child will attend the South Hills Christian Church

Parent Name

preschool on Monday, Tuesday, Wednesday, Thursday, Friday (**circle all days child attends**).

Name of Child _____ (this form required for each child that attends preschool)

Beginning on _____ (month) (day) (year)

Please initial each item-do not leave any blanks on this form

_____ I will pay Monthly Tuition of \$ _____. Payment is **due 5th of each month**. I understand that tuition is not adjusted for inclement weather, illness or personal vacations.

_____ I will provide my child a daily lunch, snack and beverage and I am solely responsible for the nutritional value of the food I am providing for my child. SHCC Preschool is not responsible for nutritional content.

_____ Tuition paid **after the 5th day of every month** is considered late, a penalty of **10% will be charged to me**. My child will not be able to attend SHCC Preschool as of the sixth day of the month and cannot return to preschool until tuition and late fees are current.

_____ I understand that supply fees are broken into two payments of \$ _____, for a total of \$ _____. The first supply fee is due in August and the second payment is due in January of each preschool year. **The supply fee is not refundable.**

_____ My child will be in care between the hours of **9:00am and 2:00pm** on each day that they attend preschool. I understand I have the option to use the programs before and/or after care if I choose. If my child is not signed up for aftercare and has not been picked up by 2:10 they will be taken to after care. I am responsible for paying the late pick up fee of \$1.00 per minute that I am late at the time of pick up. Children staying for after care program that are not picked up by 5:35 will be charged a \$1.00 per minute late fee payable at time of pick up.

_____ When I withdraw my child from preschool, I will give the preschool a one month written advance notice and pay tuition to the end of noted month.

_____ I understand that sick children are not to attend preschool, including those with fever or stomach problems in the previous 24 hours, contagious disease, or any illness that prevents my child (ren) from enjoying regular preschool activities.

_____ I understand I have 120 days after my child turns FOUR YEARS OLD to have my child's Hearing and Vision Screening completed by a physician or certified Hearing and Vision specialist. I understand that this is required by law and must be in my child's preschool records.

_____ I understand that incomplete admission records will keep my child from attending regular preschool classes at South Hills Christian Church Preschool. SHCC Preschool reserves the right to withdraw your child from preschool without current and complete admission records.

_____ I understand that I am responsible for updating all preschool admission requirements when necessary.

_____ I understand that it is important to share SHCC Preschool information with all those people listed on my admissions forms, including illness policies, late charges and emergency procedures.

_____ I have received, read, and understand the SHCC Preschool Handbook and Operational Policies.

Signature-Parent _____ **Date** _____

Signature-Director _____ **Date** _____

Do not leave blanks on this form