

Child Enrollment Form

Childs Name _____
(Last Name) (First Name) (Middle)

Child's Address _____

City _____ State _____ Zip _____

Date of Birth _____ Sex M ___ F ___

Phone # _____

Enrolling Parent/Guardian Name _____
(Last Name) (First Name) (Initial)

Relationship to Child _____ Drivers License # _____

Address _____

City/State/Zip _____

Email Address _____

Home Phone # _____ Cell Phone # _____

Employer _____ Work# _____
Ext. _____

Address _____

City/State/Zip _____

Work hours _____

Parent/Guardian Name _____
(Last Name) (First Name) (Initial)

Relationship to child _____ Drivers License # _____

Address _____

City/State/Zip _____

Email Address _____

Home Phone # _____ Cell Phone # _____

Employer _____ Work# _____
Ext. _____

Address _____

City/State/Zip _____

Work hours _____

Parents Marital Status Married Divorced Single

Primary Residence Both Mother Father Guardian

Guardian child lives with: _____

Relationship _____

If divorced, who has legal custody? _____

May non custodial parent pick up the child? Yes No

Bazzel Creek Leadership Academy must be provided with court issued custody papers that clearly describe the custody arrangements.

Any person granted custody in such papers may pick up the child during the times that person has custody and may designate other persons who are authorized to pick up the child at such times, unless court paper state otherwise.

The child will be released only to the people on this application and the following persons:

Name _____

Relationship to child _____

Address _____

Phone #.s _____

(Home)

(Cell Phone)

Name _____

Relationship to Child _____

Address _____

Phone #.s _____

(Home)

(Cell Phone)

Enrolling Parent/Guardian Signature _____

Date _____

**Bazzel Creek Leadership Academy Enrollment Form
Continued**

Child's Name _____
(Last) (First) (Middle)

Child's Physician _____

Any Allergies or Special Needs: _____

Hospital Preference _____

Emergency Contact other than parents:
Name _____

Address _____

Phone _____

Does your child have any special fear or problems?

Do you currently attend church? Yes No
If so where: _____

The Child Care Center will be open from 3:00PM until 6:00PM

- I agree I am enrolling for _____ days per week at a cost of _____.
- Payment in full is due each week, payment is not reduced for absences, early pickup, closures due to holidays, or weather conditions.
- I understand my child may be absent three weeks each year that they will not be charged for administration must be notified in advance of absences all other weeks must be paid at full rate.
- I agree to pay a registration fee at the time of enrollment
- I agree to pay in advance each week's tuition.
- I am aware that I will be charged a fee for late pick-ups.
- I will be charged a fee for all returned checks
- This institution reserves the right to terminate services for non-payment, un-controllable behavior or non-parental support of the Child Care policies and procedures. We reserve the right to refuse services if it is in the best interest of the facility or child at anytime.

I have read and understand all payment and absence policies listed above.

Parent/Guardian Name (Print) _____

Parent/Guardian Signature _____

Date _____

***Note please notify the center immediately if any information changes such as phone numbers addresses etc.

For official use only:

Date of Registration

Date of Termination Status

Emergency Medical Authorization

Should _____

(Child's Name/ Date of Birth)

suffer any injury or illness while in the care of Bazzel Creek Leadership Academy, and the facility is unable to contact me/us immediately, it shall be authorized to secure such medical attention and care for the child as deemed necessary. I/We agree to keep the facility informed of changes in telephone numbers where I can be reached. The facility agrees to keep me informed of any incidents requiring professional medical attention involving my child.

Signature of Parent/Guardian

Date

Telephone Number

PARENTAL AGREEMENT WITH LEADERSHIP ACADEMY

Bazzel Creek Leadership Academy agrees to provide child care for _____ on _____ to _____ 3:30 p.m. to 6:00 p.m. _____ days of the week from _____ to _____. My child will participate in the following meal plan:
(Circle applicable meal and snacks)
Afternoon Snack

Before any medication is dispensed to my child, I will provide a written authorization, which includes: date, name of child, name of medication, prescription number, if any; dosage, date and time of day medication is to be given. Medicine will be in the original container with my child's name marked on it.

My child will not be allowed to enter or leave the facility without being escorted by the parents(s), person authorized by the parent(s), or facility personnel.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g. telephone numbers, work location, emergency contacts, child's physician, child health status

Bazzel Creek Leadership Academy agrees to keep me informed of any incidents, including illnesses, and immunization records, etc. injuries, adverse reactions to medications, exposure to communicable diseases, which include my child.

Bazzel Creek Leadership Academy agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility.

I acknowledge that it is my responsibility to pick up my child from BCLA by 6:15. Failure to pick up my child in a timely manner will result in late fee charges to be paid by the close of business on Friday. If continual lateness occurs more than three times in one semester, the parent/guardian will require a meeting with the Director; continual failure to pick up your child on time will result in the student being dropped from the program.

Parents/Guardians are encouraged to attend awards ceremonies and participate on Saturday Excursions.

I have received a copy and agree to abide by the policies and procedures for Bazzel Creek Leadership Academy.

(Parent/ Guardian) (Date)

(Administrator) (Date)

Parent Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to Bazzel Creek Leadership Academy, to use the image of my child _____, as marked by my selection(s) below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Bazzel Creek Leadership Academy and Bazzel Creek Missionary Church Web site.

Deny permission to use my child's images at all.

Grant permission to use my child's image in the following ways (mark all that apply):

Limited usage: I want my child's image used within the Bazzel Creek Leadership Academy setting only (not in the larger community).

Limited usage: I want my child's image used for educational materials only (not marketing). This could be either within Bazzel Creek Leadership Academy or in the larger community. One example of this could be videos in parent education classes.

Limited usage: I want my child's image used on printed materials only (no digital or video use).

Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be use by Bazzel Creek Leadership Academy for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

(Parent/ Guardian Signature)

(Date)

Financial Responsibility Agreement

I understand that my child care fees are \$25 per week per child.

The program week runs Monday – Friday. Child care fees will not be prorated.

I understand that program hours are from 3:00 p.m.- 6:00 p.m. Unless prior arrangements have been made and at the sole discretion of the BCLA, I understand that I will be charged a late fee of \$2 for every five minutes that I am late picking up my child after 6:00 p.m.

I understand that the one-time registration fee is non-refundable and due prior to my child beginning the program.

Program fees may be made in advance. I understand that the child care fee is due Monday of the

week that my child attends the program. Fees received after the close of business on the Monday of a week will be assessed a \$10.00 late fee.

Bazzel Creek Leadership Academy accepts the following forms of payment: check, cash, money order, VISA, MasterCard and Discover. Payments should be addressed to Bazzel Creek Leadership Academy. I understand that if my check should be returned due to insufficient funds, I will be assessed a \$25.00 returned check fee.

(Parent/ Guardian Signature)

(Date)

Please make a copy of this form for your own records and mail or fax the original to:

Bazzel Creek Leadership Academy
c/o Bazzel Creek Missionary Church
1224 Wilbon Road
Fuquay-Varina, NC 27526
(919) 552-2513
Fax: (919) 552

Transportation Agreement

This is to certify that I give _____ (Name of Facility)
 permission to transport my child _____ (Name of Child)
 from _____ at _____ pm
 (Pickup Location/School)

to Bazzel Creel Leadership Academy on the following days:

- _____ Monday
- _____ Tuesday
- _____ Wednesday
- _____ Thursday
- _____ Friday

_____ is authorized to receive my child. In the event the
 authorized (Name of Authorized Person)
 is not present to receive my child, the following procedures are to be followed:

The _____ is approximately _____ miles from the
 center. (Location)

In the event that my child is not to be transported as outlined above, I agree to notify the
 Bazzel Creek Leadership Academy.

Signature _____ (Parent/Guardian) _____ (Date)

Sample Schedule After-School Program

3:30 - 3:45	Transportation in route to Joshua House
3:45 - 4:00	Bathroom Break & Daily After School Snack
4:00 - 4:45	Daily Instruction (Home Work, Practice Work, Study Time; Reading, Mathematics, Science, Social Studies)
4:45 - 5:15	Outside Play
5:15 - 5:45	Exploring Centers (art corner, science corner, computer lab, library) ***
OR	
5:15 - 5:45	Character Education Skills (Self - esteem, Building, Respect, Punctuality,

These are alternated with a plan to include other activities, such as Book Club, Health Education, and Career Introductions