

ENROLLMENT AGREEMENT

Jackson Way Child Development Center
1001 Andrew Jackson Way
Huntsville, AL 35801

The following conditions involved in the care of _____ are understood and agreed on between JACKSON WAY CHILD DEVELOPMENT CENTER and _____

THE CENTER AGREES THAT:

1. In return for the sum that the parent agrees to pay, the Center will give care to the above named child from _____AM to _____PM for _____days per week except for Saturday and Sunday, and the following holidays:

New Year's Day	Labor Day
Good Friday	Thanksgiving Day & day after
Memorial Day	Christmas Eve
Independence Day	Christmas Day
2. The teacher will examine the child daily for symptoms of contagious diseases, illnesses, or injury before he/she is admitted to the Center,. If the child has a fever, he/she will not be admitted until free of fever for 24 hours.
3. The Center will exercise reasonable care and judgment in all matters related to the welfare and safety of the child.
4. In case of an accident or illness the teacher will promptly take reasonable measures as are, in her judgment, in the best interest of the child, and will notify the parents as soon as possible.
5. The Center will provide, in addition to physical care, the following services: a hot noon meal; a morning and afternoon snack; emotional, social, mental, and moral/spiritual development opportunities in a group situation.
6. The Center will provide accident insurance coverage.
7. The Center will give notice in the event of any exposure to contagious disease.
8. The Center will not release the child to anyone other than the parent or guardian unless written permission is received from the parent or guardian. Names given on the Emergency/Pickup Cards are considered written permission.
9. The Center will provide resources in sufficient quantity to allow for a variety of play and learning activities during the day. Children may share favorite books and nature items with the group.

THE PARENT AGREES THAT:

1. The parent will pay the Center in advance on Monday of each week the sum of _____for care given to the above named child from _____AM to _____PM for _____days per week. The Center is open Monday through Friday from 6:30AM to 5:30PM except for hazardous weather and for the holidays listed.
2. The parent will not violate the hours of care agreed upon. There will not be reduction of fees if a child is absent or for the holidays listed. A child is entitled to one week vacation after he/she has been enrolled for one year. No fees will be charged for this vacation period.
3. Each child will be brought to his/her class by an adult who will remain long enough to allow the teacher to make sure the child is not sick. A child will not be allowed to remain in the Center if he/she has a fever, vomiting, diarrhea, rash, sore throat, or severe cold or cough. These are considered symptoms of contagious illnesses. A child must be fever free 24 hours before returning to the Center.

4. If a child is to receive an over-the-counter or prescription medication during the day, the parent must sign the medication book, giving all necessary information. The medication will be given at lunchtime unless special arrangements are made.
5. In case of illness or accident, when a parent cannot be contacted by the Center and, in the judgment of the Center staff, immediate medical care is needed, the Center and/or its designated staff is authorized to seek and obtain such medical attention, treatment, and services for the child as may be deemed necessary. Center policy requires calling 911 for medical assistance and/or transportation to Huntsville Women's and Children's Hospital unless another hospital has been designated on the Emergency Card. The parent assumes the responsibility for payment of all medical costs incurred.
6. In the event of contagious illness, the parent will notify the Center. The child will not be allowed to return to the Center until all danger of contagion is past.
7. In all emergencies, the Center has permission to take such reasonable measures as are, in the judgment of the staff, necessary to the welfare and safety of the child.
8. In the event of emergencies requiring immediate evacuation of the Center, Jackson Way Child Development Center, its personnel, and the staff of Jackson Way Baptist Church may transport children to a place of safety at which they will immediately notify each parent to pick up their child.
9. The Center reserves the right to dismiss a child if his/her fees are two weeks in arrears.
10. The Center also reserves the right to dismiss a child if, after entering, he/she seems unable to function in a group situation; for failure of the parents to comply with Center policies; or for behavior problems which cannot be resolved or which pose a danger to the child, to the other children, or to the staff. Dismissal can be immediate if the safety of others enrolled is seriously threatened. Otherwise, a two-week notice will be given.
11. Liability for the acts of the child while under the care of the Center is the parents' responsibility.
12. The Center is not liable for accidents or illnesses occurring to the child while he/she is in its care unless it can be proved that the accident or illness was the direct result of the staff's negligence.
13. The parent will give two weeks' notice when the child is to be withdrawn.
14. The parent agrees to pay \$5.00 for each 15 minutes, or portions of 15 minutes, after 5:30PM that the child is not picked up from the Center.
15. The parent agrees to pay an enrollment fee of \$75.00 per year on the anniversary of original enrollment.
16. Food must be furnished by the parent for children who are on the bottle and baby food. Disposable diapers and wipes also must be furnished by the parent.
17. Children may be disciplined for unacceptable behavior. The discipline will be administered whenever possible, by the staff member in charge at the time. Whenever possible the discipline shall be related to the behavior in question. Every attempt will be made to insure that discipline is consistent and fair. Types of discipline used in the Center include: scolding; time out in the classroom; and removal from the group.

I have read both the Center Handbook and the Parent-Center Agreement and agree to abide by the policies set forth in these documents.

Signature of parent/guardian

Date

Signature of Center Director

Date

JACKSON WAY CHILD DEVELOPMENT CENTER
EMERGENCY CARD

CHILD'S NAME _____ DATE OF BIRTH _____

ADDRESS _____

PARENTS' NAMES _____

CHILD LIVES WITH _____ HOME PHONE # _____

MOTHER'S WORK # _____ FATHER'S WORK # _____

PAGER/CELLULAR # _____ PAGER/CELLULAR # _____

CELLULAR CARRIER _____ CELLULAR CARRIER _____

EMAIL ADDRESS _____

EMERGENCY CONTACTS (IF PARENTS CANNOT BE REACHED)

1. _____ PHONE # _____

2. _____ PHONE # _____

3. _____ PHONE # _____

CHILD'S DOCTOR _____

HOSPITAL OF CHOICE _____

INSURANCE INFORMATION _____

Jackson Way Child Development Center staff may release, without advanced notice after verifying identification, my child to the following persons.

NAME _____ RELATIONSHIP _____

SIGNATURE OF PARENT/GUARDIAN _____

DATE _____



I, _____ have received a copy of Jackson Way Child Development Center's handbook. I understand that I must follow all rules as stated in the handbook, and failure to abide by these rules may result in termination of my child(ren)'s position at the center. I further understand that this handbook may be subject to change, and I must abide by all changes as they occur.

Signature of Parent or Guardian

Date