



NECFC

NEW ENRICHMENT CENTER FOR CHILDREN

1519 Old St. Augustine Rd, Tallahassee, FL 32301

Phone (850) 656-7122 · Fax (850) 671-5930

Laurina James & Shirley Pittman, Managers

ENROLLMENT PACKET

FILLABLE PDF

Welcome to the family.

"A Global Educational Plan with a Developmental Approach"

Dear Parents,

We would like to thank you for choosing New Enrichment Center for Children. We are pleased to serve your child with a home while you are at work. We appreciate and value your trust in us by enrolling your child in our center. With great excitement, we hope that you will keep the following policies and procedures in mind to ensure we create the best possible atmosphere for your child.

We invite you to come to us with any problems you may have. It is our job and responsibility to work with your family. With your help and cooperation, we can work together to provide the best care for your child. Together with your support as a parent, we can create a partnership in helping to support the development of your child. Please feel free to visit often and participate in parent meetings whenever possible.

Sincerely,

NECFC Management

What's in this packet

- | | |
|--|---------------------------------|
| 01 VPK Assessment Release | 05 Terms (initial each) |
| 02 Application for Enrollment | 06 Policies & Procedures |
| 03 Child & Family Information | 07 Discipline Procedures |
| 04 Authorized Pick-Up & Permissions | 08 Brochure Statement |

Fill in this packet on your computer, or print it and complete by hand. Return it to the front desk or email it to info@newenrichmentcenter.com.

VPK Assessment Score Release

TO

- ☐ **I do give** my permission to release my child's VPK assessment scores to New Enrichment Center for Children.
- ☐ **I do not give** my permission to release my child's VPK assessment scores to New Enrichment Center for Children.

PARENT SIGNATURE

DATE

VPK PROGRAM

TEACHER NAME

CHILD'S NAME

CHILD'S DATE OF BIRTH

SEX

☐ M ☐ F

PARENT / GUARDIAN NAME

CONTACT INFORMATION

SHIRLEY PITTMAN, MANAGER

LAURINA JAMES, MANAGER

DATE OF ENROLLMENT

Identifying Information

CHILD'S NAME

DOB

RACE

SSN

PARENT NAME

PARENT SSN

SPOUSE NAME

SPOUSE SSN

ADDRESS

HOME PHONE

CELL PHONE

EMPLOYER

WORK PHONE

Emergency Contacts

Please provide three local contacts in the event that you cannot be reached in an emergency.

NAME

WORK

HOME

CELL

Health & Insurance

CHILD'S DOCTOR

DOCTOR'S PHONE

DOCTOR'S ADDRESS

MEDICAID #

PERSONAL HEALTH INS. #

INSURANCE COMPANY

ANY ALLERGIES?

☐ Yes ☐ No

IF YES, PLEASE LIST

Child & Family Information

CHILD'S NAME

DOB

SSN

CHILD'S HOME ADDRESS

LAST DAYCARE ATTENDED

DAYS CONTRACTED TO ATTEND

HOURS CONTRACTED TO ATTEND

TUITION FEE

DATE OF WITHDRAWAL

Mother / Guardian

NAME

HOME PHONE

CELL

STATE DRIVER'S LICENSE

BIRTH DATE

PLACE OF EMPLOYMENT

WORK NUMBER

Father / Guardian

NAME

HOME PHONE

CELL

STATE DRIVER'S LICENSE

BIRTH DATE

PLACE OF EMPLOYMENT

WORK NUMBER

Authorized Pick-Up & Permissions

The child will be released **only** to the parents and the person(s) listed below. Parents must call or send a written notice if the authorized person is different than listed below.

NAME	ADDRESS	PHONE

Only the adults and children 18 years and older listed above have my permission to pick up my child(ren) from the child care center. I understand that I must notify the center of any changes to this list.

SIGNATURE	DATE

Permissions

My child, has permission to participate in field trips that I am informed about.

I, grant NECFC permission to photograph and display pictures taken by NECFC.

I, grant NECFC permission to administer Tylenol to my child.

I, agree to participate in PTO meetings scheduled by NECFC.

SIGNATURE	DATE

- | | | |
|-----------|---|---|
| 1 | I agree to pay the first day contracted to attend and each pay period thereafter a tuition fee of \$_____, with no deduction for absence or holidays. I also agree to pay a late charge of \$10.00 after the first day; \$15.00 after the 2nd; \$1.00 per day thereafter. If the tuitions are not paid by this agreement, my child's enrollment will be discontinued. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 2 | I agree to pay all required fees at the time of enrollment and each school year (beginning in August). The annual fee is not refundable. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 3 | I agree that my child, upon eligibility, will participate in: Program: Pre-School Program. Fee Due: Upon enrollment and annual fee the 1st week of August. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 4 | I agree to pay a late pick-up fee of \$1.00 per minute if my child is left in the Center after 5:30 p.m. or after the contractual period as described in the attached Policies and Procedures Agreement. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 5 | I agree to pay \$25.00 for a bad check or whatever fee is assessed by NECFC. If I give two (2) bad checks to the New Enrichment Center for Children I may no longer pay by check. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 6 | In case of withdrawal of my child from the center, I agree to give NECFC a two week notice prior to the beginning of the pay period for my child. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 7 | In the event of an emergency illness, the New Enrichment Center for Children has my permission to administer medication as prescribed or Tylenol for fever for the best intent of the child. In the event of illness while he/she is in attendance, medical expenses are the responsibility of the parents. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 8 | I agree to carry out the parents' responsibilities under the Policies and Procedures Agreement between parents and the New Enrichment Center for Children, and changes from time to time that the Center may deem necessary. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 9 | Should the Managers of the center determine that my child cannot adjust to the center's program, the child will be withdrawn after two weeks notice and the agreement will be terminated. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |
| <hr/> | | |
| 10 | This parent contract is subject to change with at least a two week notice. | <div style="border: 1px solid black; height: 25px; width: 100%;"></div> INITIALS |

After reading the above carefully, please sign on the line marked with an "X".



PARENT OR GUARDIAN SIGNATURE

PRINT NAME OF APPLICANT

MANAGER OR ACTING DIRECTOR

Agreement between parents and New Enrichment Center for Children.

1. **Hours.** NECFC is open 7:30 am to 5:30 pm. Each child shall be picked up by 5:30 pm or their contracted time daily. A charge of \$1.00 per minute begins at 5:31 pm or the contracted time.
2. **Holidays.** Closed for Labor Day, Veteran's Day, Thanksgiving Day, Christmas, New Year's, Presidents' Day, Memorial Day and Independence Day, or the day observed. Also where observed by schools and any other days NECFC may find necessary.
3. **Clothing.** Each child must have a marked change of clothing at the Center for emergencies; the Center is not responsible for marking clothing. Children should wear washable clothing and sturdy sneakers (or shoes that fully cover feet). Sandals, boots, jellies and flip-flops are unsafe for play.
4. **Personal items.** Children should not bring games, toys or food into the center unless arranged with NECFC. All personal jewelry should be taken off before entering the building.
5. Food exceptions cannot be made for individual children except for documented medical reasons.
6. Weekly menus are posted in the Center and parents may refer to them at any time.
7. **Drop-off & sign-in.** Parents must bring their child into the building and see that the child is supervised by the teacher before leaving. Children under 18 may not pick up a child. Each child must be signed in and out daily by a parent/guardian.
8. **Illness.** Children who become ill may not remain at the center; the parent will be called. Children absent with a contagious disease will not be readmitted without a physician's statement. We check for pink or red eye, fever, discolored runny nose, rashes, and 1st and 2nd degree burns.
9. Routine visits to a doctor, clinic or dentist are the responsibility of the parent.
10. **Nap time.** Each preschool child will have an afternoon rest period/nap.
11. **Outdoor activities.** Children play outside daily except in inclement weather. If your child cannot participate, bring a signed doctor's note. Please provide covered shoes and comfortable clothing.
12. **Field trips.** Children on planned field trips are transported in the school van and by parent volunteers.
13. **Medication.** Medication is administered only once daily, preferably mid-day. Permission forms must be completed weekly. All medications must be labeled, and prescriptions must carry the child's name.
14. **Breakfast.** Served 7:30 to 9:00 am. Nine o'clock is the cut-off, when the kitchen closes.
15. **Arrival time.** Students must be at the center by 9:00 am unless there is an early doctor's appointment or emergency. Please call by 8:30 am if you have a problem.
16. **Absences.** Please contact NECFC the morning your child will be out. Three (3) or more consecutive days require a doctor's statement.
17. **Conferences.** NECFC will inform parents of any problem; a conference with the parent, director and staff may be required to help your child adjust.
18. **Reimbursement.** Reimbursements for a parent's decision to withdraw a child will not be honored. Reimbursement due to illness may be excluded.
19. **Fees.** Tuition must be paid in full on or before the due date; late fees are \$10.00 after the 1st day, \$15.00 after the 2nd, and \$1.00 per day thereafter. Monthly payments are due the 1st of every month; weekly payments are due every Monday.
20. **Government regulations.** Parents must cooperate with all governmental laws, rules and regulations affecting the Center's operation.
21. **Visitation.** Parents may access all parts of the Center any time their child is present. We have an open door policy.
22. **Automobiles.** Use the marked entrance and exit. Pull all the way up to the side of the building and keep pick-up and drop-off brief. For conferences, park in the area to the right, leaving reserved spaces for staff.
23. **Potty training.** Toddlers should wear clothing that is easily pulled up and down. Please avoid belts and low-rise pants.
24. **Health certificate.** Within 2 weeks of enrollment, bring current Immunization Records and Physical Forms signed by a licensed physician. New physicals are required every two years; report immunizations as they occur.

25. This agreement may be changed at any time by NECFC to comply with governmental regulations or for any reason.

DIRECTOR

DATE

PARENT / GUARDIAN

DATE

The environment of NECFC is designed to give all our children choices of play activities and centers. This structure gives the child control over their environment and avoids behavior problems involving conflicts with others.

Children are encouraged to develop language skills that help them communicate their needs and feelings. Language is modeled by adults and older children so that they may gain skills in using this tool for problem solving.

If a child has difficulty being self-directed in one area, they are offered another play space. If the child still cannot make appropriate choices, they are removed from the situation and offered a personal space away from others to regain control. Time limits in this space are set by the child, who may return to the group whenever ready.

Guidelines for behavior are clearly explained to children. Appropriate behavior is modeled, and language is continuously encouraged to avoid conflict and give children opportunities for decision making and self-direction.

To comply with the Department of Children and Families Day Care Requirements, please read and sign this agreement acknowledging your knowledge of these practices.

1. We encourage self-discipline, kindness, and respect to others.
2. We praise good behavior frequently.
3. We handle everyday matters by talking, sitting out for a while to think about the situation, and continued talking.
4. When disruptive behavior occurs on a continual basis, we contact the parent.
5. If we contact you regarding a disciplinary problem, we consider it the beginning of a larger problem that needs your immediate attention.
6. Food, toileting, and rest are not a part of our disciplinary action.
7. **Spanking or any other form of corporal punishment is prohibited.**

Child Care Facility Brochure Statement

On , I,

received a copy of the Childcare Facility Brochure Statement.

SIGNATURE OF PARENT / GUARDIAN

NAME OF CHILD

CHILD'S DOB

Section 10M-12.013 requires that parents are notified in writing of the disciplinary practices used by New Enrichment Center for Children. The parent or legal guardian's signature verifies that they have been notified in writing of the disciplinary practices of the childcare facility.

I, have received in writing the disciplinary practices used by the facility.

SIGNATURE OF PARENT / GUARDIAN

DATE