



Enrollment Application

THIS APPLICATION IS FOR (CHECK ONE):

___Infants ___Toddlers ___Pre-K

Child's Name: _____ **Date of Birth:** _____

Expected Start Date: _____ **Age at Start Date:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Gender: Male/Female (circle one)

Parent(s)/Guardian(s) Name(s): _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Mom: Home Phone: _____ Cell: _____ Work: _____

Dad: Home Phone: _____ Cell: _____ Work: _____

Email Address(es): _____

Child's Physician: _____

Phone Number: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Emergency Contacts/Persons Permitted to pick up your Child (must show ID upon pickup):

*The contacts listed here should match the emergency contacts listed on your child's blue Day Care Registration card.

Name: _____ **Driver's License #** _____

Home Phone: _____ **Cell:** _____ **Work:** _____

Name: _____ Driver's License # _____

Home Phone: _____ Cell: _____ Work: _____

Name: _____ Driver's License # _____

Home Phone: _____ Cell: _____ Work: _____

General Information:

Does your child have any allergies? Yes/No (circle)

If yes, please specify: _____

Is your child regularly taking any medications? Yes/No (circle)

If yes, please specify: _____

Does your child have dietary restrictions? Yes/No (circle)

If yes, please specify: _____

Naps: Describe your child's nap tendencies when at home:

Does your child typically nap with a special sleep toy or blanket? Yes/No (circle)

Has your child begun toilet learning at home? Yes/ No/ Fully Using Potty? (circle)

If yes, describe: _____

Languages Spoken in Household: _____

Primary Language Spoken at Home: _____

Do you have any cultural/religious/personal beliefs and/or traditions that you would like us to know about so that we can incorporate them into your child's program while at Eco Baby?

Developmental History

Pregnancy & Delivery (please note any problems or complications):

Developmental Milestones (please note when your child accomplished most recent milestones and if there have been any concerns or delays):

Additional Comments/Concerns Regarding your Child's Development:

PLEASE READ AND INITIAL EACH SECTION BELOW:

SECTION 1: TUITION AND FEES

-----REGISTRATION FEE: I understand that a **NON-REFUNDABLE** Application Fee of \$35.00 is due upon submission of this application to enroll my child at Eco Kids, LLC. In addition, a **NON-REFUNDABLE** Deposit, to include payment of your child's first and last week's tuition, is also required to secure your child(ren)'s slot. A total deposit amount of \$_____ must be paid before your child(ren) can begin care with us.

-----TUITION and MODIFICATIONS CONDITIONS: \$_____ per week is the current tuition rate for the program I have chosen. I understand that rates are subject to change with reasonable notice as conditions require. I have enrolled my child in the following program: ___Infants ___Toddlers ___Pre-K and they will attend from approximately _____ am to _____ pm Monday through Friday.

-----PAYMENT OF TUITION: I understand that tuition is due and payable, on the first day of attendance each week (if you are going away on vacation, payment must be made BEFORE you leave). I understand that all payment policies apply whether a child is present or not, and I must pay for a full week, each week, even if I/we choose to take my child out for any reason.

-----LATE OR UNPAID TUITION: If payment in full is not received when due, I agree to pay a late payment fee of \$20/week that tuition is not received. All late fees are subject to change with reasonable notice. I understand that if my account is delinquent for more than ten days, I may be asked to withdraw my child until my account is made current. Eco Kids, LLC. cannot guarantee a child's spot will be held when a child is withdrawn due to non-payment of tuition. When necessary, unpaid tuition fees will be sent to a third-party agency for collection.

-----AGENCY REIMBURSEMENT: I understand that I am solely responsible for any tuition payment and late fees in excess of any agency or third-party reimbursement in accordance with the applicable contract. I also understand that I am solely responsible for promptly communicating any changes in my status that would affect my agency reimbursement, and that I am solely responsible for payment of any tuition in excess of any agency or third-party reimbursement resulting from my failure to promptly communicate status changes. If I fail to properly enter or swipe attendance for any day my child is in attendance, I understand that I am solely responsible for the payment of tuition

-----CHARGES AND PROCEDURE FOR LATE PICK-UP: My school is open from 7:00 am to 5:30 pm, Monday through Friday all year, except for holidays. I understand that if I fail to pick up my child by the scheduled closing time, I will be charged a late fee of \$1 per every minute, per child, until the child is picked up. I agree to make this payment in cash that day or no later than the close of the following business day. Late fee payments that are not made in a timely fashion are subject to a \$20 late payment fee. Please note Eco Kids, LLC. reserves the right to terminate care if late pick-ups become a habit.

-----DISCOUNTS: I understand that if I have more than one child enrolled and attending from my immediate family, a 10% discount from the usual tuition fee is offered to me and is applied to the child(ren) with the lowest tuition rate(s). These discounts are only available to those accounts when full tuition is paid in advance.

-----RETURNED CHECKS: I understand that a \$30 processing fee will be charged to my account for all checks which are returned for any reason.

SECTION 2: DAILY PROCEDURES

-----ILLNESS: I understand that I will be notified should my child become ill during the day, and that I will pick up my child promptly, within one hour, or will make arrangements for an authorized emergency contact person to pick up upon such notification. If my child is exposed to or contracts a contagious disease, I agree to notify the school and I understand that my child will be re-admitted according to the Re-Admission Criteria in the Family Handbook.

-----MODEL RELEASE:

Eco Kids, LLC., may may not (check one) use photographs, reproductions, images or sound recordings of my child for advertising, publicity or any other lawful purpose in PUBLIC FORUM (ex. Facebook, Instagram, brochures, website, flyers, etc.).

Eco Kids, LLC., may may not use photographs, reproductions, images or sound recordings of my child for IN-HOUSE use only (ex. art projects, displays in classroom, parent holiday presents, etc.).

-----PHOTOGRAPHS, VIDEOS AND AUDIO TAPES: I understand and agree that, in consideration for being allowed to photograph, videotape or audio record my child on company property, I shall only use such recording for lawful and private home use, and will not publish, publicly display or sell such recordings. I also understand that I must have written permission before capturing any image of the other children in the school or staff.

-----WITHDRAWAL FROM PROGRAM: I understand that I must provide a 30 day written notice of withdrawal from the program. If this notification is not provided, I agree to pay a \$250.00 fine in addition to full tuition for 4 weeks, whether my child attends or not. Your enrollment deposit will be applied to your last week of care. No refunds will be made. I understand that when my child is withdrawn, s/he will only be eligible for re-admission based upon space availability and all other enrollment criteria. If my child is selected for re-enrollment, I will be required to complete a new Enrollment Agreement at the current rate and pay a new non-refundable Registration Fee at the current rate. If there is an outstanding balance (including tuition or fees) from when my child was withdrawn, I will be required to bring my account current prior to completing a re-enrollment application. I understand all fees (Tuition, Registration or Activity) are nonrefundable.

-----ACTIVITIES RELEASE: I understand that by enrolling my child, I grant permission for he/she to participate in all daily activities of the program and use all play equipment, both indoor and outdoor that is age-appropriate. I will not hold Eco Kids, LLC. liable for injuries occurring while my child is under the care of Eco Kids. This includes going on community walks and field trips, for children of all ages.

-----MEDICAL TREATMENT: In the event of a medical emergency, parents, paramedics and/or medical personal will be notified immediately to obtain medical attention for your child.

All efforts will be made to notify you immediately, depending on circumstances. I understand that due to insurance regulations, all injured children shall be transported to a hospital by ambulance and that all medical expenses are my responsibility and not that of Eco Kids, LLC. I understand that upon examination by qualified hospital personnel, I give consent to any X-ray, medical, or surgical treatment deemed necessary by a licensed physician. I will provide the center with all medical and insurance information.

Insurance Company: _____ Group: _____

ID #: _____ Card Holder Name: _____

List of Known Allergies: _____

List of Known Medical Conditions: _____

-----TOPICAL OINTMENTS: I understand that Eco Baby is NOT regulated to administer any medications other than over-the-counter topical creams (sunscreen/ insect repellent and diaper creams). I understand that I must give written permission, on the appropriate form, before the center can apply said (parent-supplied) creams to my child as needed: diaper cream, sunscreen, bug spray or other topical ointment (including lip balm). All medications/creams MUST be in their original packaging, labeled with the child's first and last name, not past the expiration date. I understand that if I do not supply these items my child will still participate in the daily routine of the center without them (ex. Children will still go outside if sunscreen is not supplied despite the risk of sunburn).

-----NAPPING AGREEMENT: Per NYS regulations, sleeping and napping arrangements must be made in writing between the parent and the care provider. I understand that my child(ren) while under the care of Eco Kids, LLC, will be napping either in a crib (infants) or on a cot (18mo - 60 mo.) while in care. Napping children will have competent supervision at all times through direct supervision of a caregiver whom is in the same room and has visual contact with him/her. Infants will not be permitted to sleep in a stroller, car seat, swing or any other equipment.

-----EMERGENCY CONTACT LIST: I will provide Eco Kids, LLC. with a list of AT LEAST 3 people over the age of 18 who are authorized to pick up my child(ren) in the event of an emergency. I agree to let Eco Kids, LLC. know if someone other than myself is picking up my child. If a person who is not listed on said forms is scheduled to pick up your child, you must notify The Director in advance, either in writing or over the phone. Your child will not be released to any unauthorized individual without proper notification. Any unrecognized individuals will need to show proper ID before they can take a child with them. **Please inform your pick-up person to bring ID with them.**

SECTION 3: HOLIDAYS, ABSENCES AND CLOSINGS

-----HOLIDAYS: I understand that Eco Kids, LLC. is Closed in observance of a pre-determined list of days and that tuition for these weeks will remain the same. There will be no discount given for holiday closings. A list of closings for the year will be given to each family upon enrollment and each November thereafter.

-----ABSENCES/VACATIONS: I agree to inform The Director immediately if my child will be absent on any day. I understand that no allowances, credits, refunds, or make up days shall be made for occasional absences (i.e. sickness).

-----EMERGENCY CLOSINGS AND INCLEMENT WEATHER INFORMATION: I understand that it is the company's intention to be open and provide child care service every weekday of the year, excluding holidays, but that inclement weather, natural/national disaster or a major building issue may disrupt service from time to time. I will contact the school to ensure that it is open during inclement weather/natural disaster. I agree that in the event that the school is closed for an extended period of time, I will continue to be responsible for my tuition payments to hold my child's spot.

SECTION 4: STATE LICENSING AND OUR POLICIES

-----ALL POLICIES & STATE REGULATIONS: I understand that the above policies are not an all-inclusive list of policies, and that my child, my family members, authorized agents and I are bound by New York State child care regulations, the Family Handbook, and all other company policies, which may be modified at any time, without notice. I also understand that the child care regulations of the state in which my child attends may prevail over these policies when the state regulation is stricter. I further understand that my center can choose to override any state policy, doctor's recommendation or medical note so long as they are following state regulations minimum guidelines and that my enrollment constitutes my acknowledgement of, and agreement to abide by, all center policies and state regulations.

-----Your child's pediatrician must complete the NYS OCFS Child in Care Medical Statement prior to beginning at Eco Baby. This form states that, "Per NYS Law, a blood test is required at 1 and 2 years of age." This should be completed by the pediatrician in the section labeled "Tests" at the bottom of page 1. We strongly encourage that lead testing information is furnished by your child's pediatrician, as downtown Troy and the Northeast in general are known to have areas with elevated lead levels. If for some reason your child has not been tested for lead at 1 and 2 years of age, we will give your family information on lead poisoning and prevention. Eco Kids, LLC. cannot be held liable for any lead related issues, incidents, or health concerns.

-----FAMILY HANDBOOK: I have read the Family Handbook, available online, and provided to me in hard copy upon enrollment. I have read and understand its contents and policies and agree to be bound by same. Eco Kids, LLC. does not discriminate based on disability in the admission/enrollment or access to our programs or services. Information concerning the provisions of the Americans with Disabilities Act (ADA), including the rights provided thereunder, is available from The Director.

These policies have been reviewed with me by school management. I understand and will comply with the policies included in the Enrollment Agreement and Family Handbook.

Parent/Guardian Signature:----- **Date:** -----

Eco Kids, LLC. Administrator Name:-----

Signature:----- **Date:** -----