



Busy Bee Child Development and Learning Center

Enrollment Packet | 2026–2027 School Year

455 48th St. W. • Bradenton, FL 34209
Office: 941-900-2035 • Cell: 941-932-5586
License #C12MA0374

Student Information

Child's Full Name: _____

Date of Birth: _____ **Gender:** ☐ Male ☐ Female

Enrollment Start Date: _____

Home Address: _____

Mailing Address (if different): _____

Primary Family Email: _____

Home Phone Number: _____

Parent / Guardian Information

Parent / Guardian 1

Name: _____

Relationship to Child: _____

Employer: _____

Occupation: _____

Work Address: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____

Parent / Guardian 2

Name: _____

Relationship to Child: _____

Employer: _____

Occupation: _____

Work Address: _____

Cell Phone: _____

Work Phone: _____

Email Address: _____

Emergency & Medical Information

Child's Physician: _____

Physician Phone Number: _____

Preferred Hospital: _____

Medical Information

Please list any medical conditions, allergies, dietary restrictions, or ongoing medications.

Does your child require medication while at the center? ☐ Yes ☐ No

If yes, a Medication Authorization Form must be completed.

Emergency Contacts

Please provide at least three emergency contacts other than parents/guardians.

Name	Relationship to Student	Phone Number
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Authorized Pick-Up Individuals

Individuals listed below are authorized to pick up your child from Busy Bee Child Development and Learning Center.

Please note:

- Written authorization is required for any person not listed below.
- Verbal or phone authorizations will not be accepted.
- A valid photo ID may be required at pick-up.
- It is the parent/guardian's responsibility to keep this information current.

Name	Relationship to Student	Phone Number

Mother Authorized for Pick-Up: ☐ Yes ☐ No

Father Authorized for Pick-Up: ☐ Yes ☐ No

Neither parent may be denied access to a child unless legal documentation is provided and kept on file at the center.

Parent Authorizations & Consents

This authorization remains valid throughout the child's enrollment unless revoked in writing.

Please initial each item below.

Authorization	Initials
I authorize my child to participate in all center activities, including classroom celebrations and special events.	_____
I authorize Busy Bee Child Development and Learning Center to transport my child for emergency medical care if necessary.	_____
I authorize emergency medical treatment for my child when a parent/guardian cannot be reached.	_____
I authorize the release of my child's medical records to Busy Bee Child Development and Learning Center when necessary for care or emergency purposes.	_____
I authorize Busy Bee Child Development and Learning Center to use photographs or videos of my child for educational, promotional, or social media purposes.	_____
I authorize educational and/or developmental assessments as needed during my child's enrollment.	_____

Parent/Guardian Signature: _____

Date: _____

Discipline Policy

Busy Bee Child Development and Learning Center is committed to maintaining a safe, respectful, and nurturing environment for all children. Our discipline philosophy focuses on teaching appropriate behavior, self-control, and positive social interaction.

Positive Guidance Methods

Our staff may use the following age-appropriate guidance techniques:

- Positive reinforcement
- Redirection
- Calm-down or relaxation time
- One-on-one support and guidance
- Temporary removal from the classroom environment when necessary for safety

Physical punishment, humiliation, food restriction, bathroom-related discipline, or any form of harsh treatment is strictly prohibited.

Behavioral Support Process

If persistent behavioral concerns arise:

1. Parents will be notified after ongoing inappropriate behavior is observed.
2. A parent conference may be scheduled with teachers and administration.
3. A behavior support plan may be developed collaboratively.
4. Additional professional support or evaluation may be recommended when appropriate.
5. Failure to comply with recommended behavioral procedures may result in dismissal from the program.

Busy Bee Child Development and Learning Center reserves the right to take immediate action when a child's behavior poses a safety risk to themselves, other children, or staff.

I acknowledge that I have received and reviewed the Discipline Policy.

Parent/Guardian Name: _____

Signature: _____

Date: _____

Tuition & Payment Agreement

Please initial each statement below.

Agreement	Initials
Tuition is due in full each Friday for the upcoming week of care.	_____
Accounts more than two weeks past due will incur a \$10.00 daily late fee until paid in full.	_____
Returned payments will incur a \$25.00 returned payment fee.	_____
Tuition is due regardless of attendance. No refunds, credits, or prorated tuition will be provided.	_____
Childcare services may be suspended if tuition is not paid in full.	_____
Outstanding balances may be referred to collections or legal action, and the responsible party agrees to pay all associated collection costs and legal fees.	_____
Accounts referred to collections may be reported to credit reporting agencies.	_____
A finance charge of 1.5% per month may be added to outstanding balances.	_____

Liability Acknowledgment

Please initial each statement below.

Acknowledgment	Initials
I understand that Busy Bee Child Development and Learning Center is not responsible for injuries or incidents caused by another child's actions beyond reasonable supervision.	_____
I release and hold harmless Busy Bee Child Development and Learning Center, its staff, directors, and representatives from claims or liabilities arising from participation in school-related activities, except in cases of gross negligence or unlawful conduct.	_____

Required Enrollment Documents

The following documents are required within 30 days of enrollment:

- Florida Physical Examination Form (Form 3040)
 - Florida Immunization Record (Form 680 or 681)
 - Receipt of the center's discipline and expulsion policies
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Parent Acknowledgment

By signing below, I acknowledge that:

- The information provided in this enrollment packet is complete and accurate.
- I have received and reviewed all required policies and documents.
- I grant Busy Bee Child Development and Learning Center access to my child's records as necessary for enrollment and care.

Parent/Guardian Name: _____

Signature: _____

Date: _____