



NEW STUDENT ENROLLMENT FORM ACADEMIC YEAR 2022-2023

Class determined by age of child on Aug. 1, 2022

(Scholarships available upon request.)

- 2.5/3 year-old Class** (F 8:30-11:30) (\$50)
- 3/4 year-old Class** (M/T/W 8:30-11:30) (\$150) (Mostly Potty-trained)
- 4/5 year-old Pre-K Class** (M/T/W/Th 8:30-11:30) (\$180)
- 5th day Option Pre-K Class** (Friday 8:30-11:30) (\$25) (Must be enrolled in the Pre-K Class)

Will your child be attending kindergarten during the 2023-2024 school year?
Yes No (circle one)

**A NON-REFUNDABLE ENROLLMENT FEE OF \$60 IS DUE UPON REGISTRATION.
SPACE IN EACH CLASS IS LIMITED. (Your child will not be placed in a class until the fee is paid.)**

Child's Name: _____ Preferred Name: _____

____ Female ____ Male DOB: _____ Preferred Phone: _____

Home Address: _____

City, State, Zip: _____

Mother's Name: _____ Occupation: _____

Cell Phone: _____ Email: _____

Father's Name: _____ Occupation: _____

Cell Phone: _____ Email: _____

Mother resides with child: Yes No Father resides with child: Yes No

Sibling Information:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Allergies (food, insects, etc.): _____

Health issues (asthma, etc.): _____

Fears: _____

Do you currently have a home church? ____ yes ____ no If yes, please list _____

Parent/Guardian Signature: _____ Date: _____

**PLEASE MAIL OR RETURN COMPLETED APPLICATION and ENROLLMENT FEE TO:
TLC Early Learning • 1801 N. Main St Auburn, IN 46706 • 260.925.6544**

Child's name: _____ Date of Birth: _____

EMERGENCY CONTACTS (List in order to be contacted after contacting parents **Do NOT list parents.**)

1. Name: _____ Phone #: _____

Relationship to child: _____

Do you give permission for child to be released to this person? Yes _____ No _____

2. Name: _____ Phone #: _____

Relationship to child: _____

Do you give permission for child to be released to this person? Yes _____ No _____

3. Name: _____ Phone #: _____

Relationship to child: _____

Do you give permission for child to be released to this person? Yes _____ No _____

AUTHORIZED PERSONS TO PICK UP A CHILD

Your child will only be allowed to leave with the persons listed below. **Include parents' names too.** If someone is going to pick up that is not listed, you will need to send a signed note to the school.

Name

Relationship to Child

TLC EARLY LEARNING AUTHORIZATION AND CONSENT FORM

Please read and initial each section and then sign at the bottom of the page.

MEDICAL AUTHORIZATIONS

1. I authorize the TLC Early Learning teachers who are trained in First Aid and CPR to give my child first aid and medical attention when appropriate.
2. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize the TLC Early Learning or Emergency Medical Response personnel to transport my child to the nearest medical facility for necessary medical treatment for my child.
3. I will supply the school with **current physical and current vaccination records within 30 days of starting school.**

4. Child's Physician's name: _____ Phone Number: _____
Parent Initials: _____

PARENT NOTICE

I understand that this childcare ministry (TLC Early Learning, Auburn, IN) is not licensed under the laws of Indiana. However, I understand that this childcare ministry must comply with the state rules concerning sanitation and fire safety for the primary use of the structure in which it is conducted. I understand that it is my responsibility to ensure that the nutritional and health needs of my child are met while my child is at the childcare ministry. This notice does not absolve a childcare ministry from liability for injury to a child while the child is at the childcare ministry if the cause of the injury is negligence or intentional wrongdoing on the part of the childcare ministry or an employee of the childcare ministry.

Parent Initials: _____

TUITION PAYMENT POLICY

Tuition payments for TLC Early Learning are due on the **5th** day of each month. Any payment received after the 5th day is subject to a late fee in the amount of \$10.00. All payments are to be placed in the drop box outside the school office or paid through HiMama. Please make all checks payable to TLC Preschool.

Parent Initials: _____

SAFE TRANSPORTATION OF FOOD RESPONSIBILITY

Food must be brought to the facility in clean, insulated, sanitizable containers which keep food at 41 Degrees F or below and hot food at 135 degrees F or above. Containers must be clearly labeled with the child's name and date of preparation. Upon receiving the food, the facility shall verify the temperature of the food. When potentially hazardous food temperature is not correct, the facility will not accept the food. Upon accepting the food, the facility shall maintain the correct food temperature until served. By signing I take full responsibility for the safety of my child's food during preparation, storage, and transportation to the facility.

Parent Initials: _____

TLC EARLY LEARNING ON-PROPERTY PERMISSION SLIP

I give permission for my child to explore and go for walks and nature hikes on school property and Greenhurst Commons with the TLC Early Learning staff.

Parent Initials: _____

PUBLICITY RELEASE

I give permission for my child's picture to be released for publicity purposes through the church newsletter, local newspaper, and social media.

Yes: _____ No: _____ Parent Initials: _____

POLICY AND PROCEDURES PARENT HANDBOOK

I/We have read the "Parent Handbook". By signing below, I/We are agreeing to abide by the policies and procedures within. Handbook can be accessed at the preschool website on the Resource Page.

Parent/Guardian Signature: _____ Date: _____

TLC EARLY LEARNING'S DISCIPLINE/GUIDANCE POLICY

TLC seeks to foster a caring environment in the classroom that is conducive to the education of all children present. It is very important a child's development is nurtured through caring, patience, and understanding. However, while caring for your children, we may have to respond to your child's misbehavior. Hitting, kicking, spitting, hostile verbal behavior, and other behaviors which will hurt another child are not permitted.

In response to misbehavior, we will:

- Respect your child
- Establish clear rules and be consistent in enforcing rules
- Remove the child from the situation and talk to him or her about the behavior
- Use positive language to explain desired behavior
- Speak calmly while bending down to your child's eye level
- Give clear choices
- Redirect your child to a new activity
- If the behavior continues, the child can sit with the Director until they calm down.
- If the child cannot calm down after a reasonable amount of time, the parents will be called.

In response to these behaviors, we will not use:

- Threats or bribes
- Physical punishment, even if requested by the parent
- Deprive your child of food or other basic needs
- Humiliation or isolation

Recurring disciplinary problems will be addressed with parents and documented in the child's record. In extreme cases, a child who is habitually disruptive to the class and whose behavior has not improved satisfactorily may be suspended or expelled from the school for the remainder of the school year.

As a parent, you may have some concerns or wish to offer suggestions. Using the lines below, we may modify the above plan with agreed-upon suggestions.

Child's Name

Date of Birth

Additional techniques to be used with my child:

Parent/Guardian Signature _____ Date _____