



ST. CLEMENT'S ACADEMY

ENROLLMENT AND TUITION FEES

SPONSOR INFORMATION

Sponsor Name _____ SSN ____-____-____ Email _____
 Address _____ City _____ Zip Code _____
 Preferred Phone Number _____ Cel or Home _____
 Employer _____ Work Phone _____
 Co-Sponsor Name _____ SSN ____-____-____ Email _____
 Address _____ City _____ Zip Code _____
 Preferred Phone Number _____ Cel or Home _____
 Employer _____ Work Phone _____

Permitted to Pickup Child: Father: Yes _____ No _____ Mother: Yes _____ No _____
 (If No, Court Ordered Documents required.)

Persons Other than Sponsors Permitted to Pick Up Child In An Emergency: (Required One Local Contact)

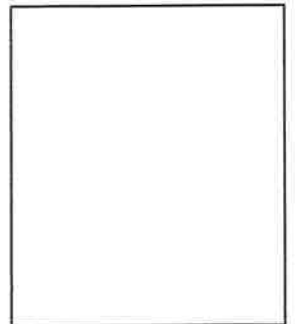
1. Name _____ Relationship: _____
 Address _____ D.L # _____
 City _____ State _____ Zip _____ Phone Number _____

Please list all contact information for additional people authorized to pick up your child on the back of this form.

STUDENT INFORMATION

Student Last Name _____ First Name _____
 Sex: Male or Female Date of Birth ____/____/____ First time in Preschool? Yes or No
 Food and/or Drug Allergies: _____
 Pediatrician _____ Phone _____
 Is Child taking medication? _____ Is Child Toilet Trained? _____

I Do / Do NOT authorize the use of photography taken of my child at St. Clement's Academy for the purposes of advertising, promotional, or other proprietary uses deemed suitable by St. Clement's Academy.



Child's Photo

Schedule of Attendance (please circle)

Days of Attendance: Monday Tuesday Wednesday Thursday Friday

Normal Hours of Attendance: _____ AM/PM to _____ AM/PM

Typical Meals Served each Day: Breakfast Lunch PM Snack

Households receiving Food Assistance Program or TANF Benefits:
 Food Assistance Program Case Number _____ or TANF Case Number _____

A Non-Refundable Registration Fee and a Tuition Deposit Fee are due upon enrollment. I understand the cost of the above-stated schedule to be \$ _____ per week, and that I agree to pay this fee **In Advance** according to the payment policies as outlined on the Agreement Form. I understand the Tuition Rates are subject to change at any time during the school year.

I have read and understood the Tuition Fee Payment Policy, which is part and parcel of "**The St. Clement's Academy Agreement.**"

Signature of Sponsor _____ Date _____

Signature of Co-Sponsor _____ Date _____



PAYMENT AND PRESCHOOL POLICY

PAYMENT POLICIES

ANNUAL REGISTRATION FEE - A non-refundable Registration Fee shall be paid at the time of enrollment, and is paid each consecutive year during Spring registration. TUITION DEPOSIT - A Deposit is paid at the time of enrollment and will be applied to the balance due the last week your child attends school each year. TUITION FEES - Tuition Fees are based upon the Program and Schedule selected at the time of enrollment. PAYMENTS - All Payments must be Pre-paid. STUDENT WITHDRAWAL - The Sponsor/Co-Sponsor must provide written notification to the Director two weeks in advance of the withdrawal. COLLECTIONS - Service will be suspended on accounts that have not been prepaid in accordance with the TUITION FEES & PAYMENT POLICY above. NSF FEES - A Fee will be added to the customer's account for any returned ACH or Credit Card Charge backs. LATE PICK UP CHARGES - A late pick up fee will be charged after the closing hours of the Preschool at 6:00 pm. SCHOOL HOLIDAYS - Tuition fees are not adjusted or prorated when the school is closed for Holidays. STUDENT ABSENCES - Please provide written notification to the Director when your child will be absent from school. VACATION REQUEST - Families may request a up two weeks of vacation credit by submitting a vacation request.

PRESCHOOL POLICIES

SPECIAL INSTRUCTIONS - Any special instructions should be given in writing to the Director. RELEASE OF CHILDREN - Children will be released only to those persons whose names are listed on the Enrollment Form. EMERGENCY CONTACT - A Local Emergency Contact Person must be provided on the Enrollment Forms. CONFIDENTIALITY - All personal information regarding a student will be confidential. CHILD ACCIDENT INSURANCE - St. Clement's Episcopal Church carries a student insurance policy on each student. DRESS CODE - Children should wear washable, comfortable clothing. DAILY REGISTRATION - Parent's are required to sign in and out daily. CHILD ILLNESS - Parents will be notified if their child becomes ill at the school. SPECIAL DIETARY NEEDS - A Doctor's form will be required to document any special dietary needs before food may be brought that do not meet USDA recommendations. PRESCRIPTION MEDICATIONS - Prescription medication may be administered at the school with written permission of the parent. AGES AND STAGES QUESTIONNAIRE - This screening tool is administer every six months to assess your child's growth and development. DISCIPLINE POLICY - St. Clement's Academy follows the "CHILD DAY CARE STANDARDS" of the Florida Administration Code - Chapter 1 OM-12.013 on Child Discipline. DCF FORMS - Section 1 OM-12.008 of the Florida Administration Code requires that parents must receive or read a copy of the Child Care Facility Brochure (CF/PI#175-24), "KNOW YOUR CHILD'S DAY CARE CENTER." Also, the parents must return the acknowledgment form after reading CF/PI 175-70, "INFLUENZA VIRUS BROCHURE."

I (We) have received in writing and read the "ENROLLMENT AND TUITION FEES", the "PAYMENT AND PRESCHOOL POLICY", and the "CHILD CARE FACILITY BROCHURE" and "INFLUENZA VIRUS BROCHURE" as outlined above, and do hereby abide by this "AGREEMENT."

Signature of Sponsor Date Signature of Co-Sponsor Date



RELEASE FOR EMERGENCY CARE

I hereby give my consent to any emergency facility and physician to administer necessary treatment to:

(Name of Child)

Primary Care Physician's Name

Telephone Number

Allergies: _____

Date of Last DPT or Tetanus: _____

Insurance Company covering child: _____ Policy Number: _____

Address: _____ City _____ State _____ Zip _____

Telephone Number: _____

In the event of an emergency at which time I cannot be reached, I give consent to transport by ambulance.

Signature of Parent/Guardian/Sponsor Date

Driver's License- State	#	D.O.B.
Race	Sex	Height
	Hair	Eyes

Signature of Parent/Guardian/Co-Sponsor Date

Driver's License- State	#	D.O.B.
Race	Sex	Height
	Hair	Eyes

STATE OF _____ COUNTY OF _____

On the _____ day of _____, 20____, before me came _____
_____ to me known to be the individual described in and who
executed the foregoing instrument and acknowledged that (s)he executed the same.

Notary Public



NUTRITION AGREEMENT

AS YOUNG CHILDREN GROW THE FOOD THEY EAT IS THE MATERIAL THEIR BODIES USE TO DEVELOP PHYSICALLY AND COGNITIVELY. THE FOOD A CHILD EATS AFFECTS HIS OR HER GROWTH, ENERGY, ATTITUDES, INTELLIGENCE AND GENERAL HEALTH.

NAME OF CHILD _____ DOB _____

PARENTS ARE RESPONSIBLE FOR PACKING A LUNCH FOR THEIR CHILD EACH SCHOOL DAY. REFRIDGERATION IS NOT PROVIDED. PLEASE PACK APPROPRIATE COOLING ITEMS IN THE LUNCHBOX TO PRESERVE PERISHABLE ITEMS.

THE MID-DAY MEAL MUST INCORPORATE EACH OF THE FOLLOWING FOOD ITEMS: **FRUIT, VEGETABLE, STARCH AND PROTEIN** TO MEET MY CHILD'S NUTRITIONAL REQUIREMENTS. FOODS LOW IN SUGAR AND SATURATED FAT WITH MINIMAL FOOD DYE AND PRESERVATIVES ARE RECOMMENDED FOR ALL AGE GROUPS. NO COLA OR CANDY IS PERMITTED AT SCHOOL.

INDICATE ANY FOOD ALLERGIES OR SPECIAL DIETARY ISSUES AFFECTING YOUR CHILD:

FOOD: _____	REACTION: _____
_____	REACTION: _____
_____	REACTION: _____

SPECIAL DIETARY ISSUES: _____

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO PROVIDE A HEALTHY PACKED LUNCH WITH THE REQUIRED FOOD GROUPS FOR MY CHILD'S MEAL EACH SCHOOL DAY.

Signature of Sponsor

Date

Signature of School Director

Date



ST. CLEMENT'S ACADEMY

The Behavioral Code of Conduct applies to all children and adults on the premise of our School.

—Children—

Children are required to comply with the following behavioral guidelines while on the School property. (All guidelines will be applied based upon age appropriate social and emotional guidelines for the individual child involved.)

- Children will be respectful of all teachers, management personnel, other children and adults.
- Children will not intentionally destroy or damage school property or property of the other children and adults.
- Children will use appropriate language. Vulgar or threatening language will not be tolerated.
- Children will not touch other children or adults inappropriately.
- Children will participate in classroom activities and follow the daily routine.

The goal of the children's Behavioral Code of Conduct is to establish a minimum level of acceptable behavior from the children in the school. If a child is unable to meet this minimum level of acceptable behavior following procedure will be followed:

1. Parents will be notified by telephone, incident form or conference.
2. The Parents and School will devise a behavior modification plan to stop the inappropriate behavior and encourage appropriate behavior.
3. A prescribed period of time will set to implement this plan and for the child to stop the behavior.
4. If the behavior does not stop in the prescribed time limit, the child will be expelled from the school.

—Adults—

Parents, family members or other adults authorized to be on school premise are required to comply with the following behavioral guidelines while on the School property.

- Adults will be respectful of all teachers, management personnel, other children and adults.
- Adults will use appropriate language. Vulgar or threatening language will not be tolerated.
- Adults will not touch children or adults inappropriately. Corporal punishment is expressly prohibited while on school property.
- Adults will not damage or destroy school property.
- Adults will comply with all safety procedures which is not limited to keeping all school doors closed, checking that door locks latch upon exiting from building, no parking in the fire lane in front of the building and traveling through the school's parking lot slowly while watching for children and other adults.
- Adults will refrain from discussing specific information about other children or families at anytime, whether on or off of school property.
- Adults will bring all comments, concerns or issues to the School Director immediately.

If an Adult does not comply with this minimum level of acceptable behavior they will be denied access to the school and its property. Further consequences for non-compliance with these guidelines may include but are not limited to expulsion, criminal charges, and legal action.

I have read, understand and agree to comply with Behavioral Code of Conduct as it applies to myself and my child(ren),

[Name of Child(ren)]

Signature of Parent/Guardian/Sponsor

Date

Signature of Parent/Guardian/Co-Sponsor

Date