

Broadwater Academy Pre-Kindergarten and/or Extended Care Registration Information (circle one or both)

Child's Full Name _____ Nickname _____
First Middle Last

Sex ___M___F Age _____ Birth Date _____
Home Telephone Number _____
Mailing Address _____
911 Address _____

PARENTS/GUARDIANS

Father's Name _____
Home Address _____
Home Number _____ Cell Number _____
Place of Employment _____ Business Number _____

Mother's Name _____
Home Address _____
Home Number _____ Cell Number _____
Place of Employment _____ Business Number _____

EMERGENCY INFORMATION

Child's Physician _____ Physician's Number _____

INSURANCE INFORMATION

Medical treatment costs are covered by:
Insurance Company _____ Policy or Group Number _____

List the names and telephone numbers of two separate people at two separate addresses to contact if parents cannot be reached:

1-Name _____ Relationship to child _____
Address _____
Home Number _____ Cell Number _____

2-Name _____ Relationship to child _____
Address _____
Home Number _____ Cell Number _____

RIDE AUTHORIZATION AND RESTRICTION

List the names of three people authorized for pick-up of your child(ren):
1. _____
2. _____
3. _____

List the names of person(s) not authorized to visit or pick up your child(ren):
1. _____
2. _____

CUSTODY OF CHILD(REN)

Name and Address _____
Phone Number _____
Business Address _____
Phone Number _____

PRE-KINDERGARTEN PRE-ADMISSION BACKGROUND INFORMATION

(complete if Pre-K student only)

Broadwater Academy’s Pre-Kindergarten staff needs your help to understand and plan for your child. Please complete this form and return it to your child’s Pre-Kindergarten teacher.

CHILD’S INFORMATION:

Please check all that apply:

Is your child generally: cooperative _____ shy _____ competitive _____ aggressive _____
sensitive _____ submissive _____ angry _____ happy _____

Does what is asked of him/her: Usually _____ Seldom _____

Whines when asked to do a task: Usually _____ Seldom _____

List other behaviors characteristic of your child:

- 1) _____
- 2) _____

Special interests: singing _____ painting _____ stories _____ trucks _____
pets _____ outside play _____ coloring _____
other _____

Child’s appetite: always hungry _____ eats at mealtime _____ snacks _____
snacks all day _____ never hungry _____ has to be coaxed to eat _____

Child’s sleep habits: takes a nap _____ approximate number of hours of sleep/night _____

Child’s speech: rapid _____ slow _____ moderate _____ clear _____
talks constantly _____ seldom speaks _____ uses many words _____
uses few words _____ talks only during play _____
other characteristics of speech _____

Is your child toilet trained (must include taking care of his/her own “paperwork”)? Yes _____ No _____

Does your child use a special word for toileting? Yes _____ No _____ If yes, please state _____

Does your child exhibit any fears? Yes _____ No _____ If yes, please state _____

FAMILY AND DAYCARE INFORMATION:

Please list other family members living at home (including siblings, grandparents, cousins, etc):

Name	Age	Relationship To Child	Indicate Name Used By Child
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Has your child had any previous school experience? Yes _____ No _____

If so, please give names of daycare centers, schools, or providers:

- Center, School or Provider _____
- Length of Attendance _____
- Center, School or Provider _____
- Length of Attendance _____

AGREEMENTS AND MEDICAL AUTHORIZATION

(complete for both Pre-K and Extended Care)

- 1) I certify that my child is physically fit to take part in all activities. I will not hold Broadwater Academy responsible in case of accident or injury as a result of participation. (Please list any restrictions or limitations, if any, _____).
2) I give authorization for the child to participate in field trips. YES or NO (circle one)
3) I understand that Broadwater Academy will notify me as soon as possible if my child should become ill, and I agree to pick up my child as soon as possible.
4) I understand that I will notify Broadwater Academy within 24 hours if my child should be diagnosed with a communicable disease.
5) I understand that the order of actions taken will follow the outline below unless there is need for immediate action, but will not be limited to these actions:
a. Parent/guardian will be called
b. Child's physician will be called
c. Emergency contacts will be called
d. If none of these efforts are successful
i. An ambulance will be called
ii. The child will be taken to the emergency room of the nearest hospital, accompanied by a Broadwater Academy staff member. The authorized staff member may obtain immediate medical care and consent to the hospitalization of, the performance of necessary diagnostic tests upon, the use of surgery on, and/or the administration of drugs to the child.
6) In the event of a medical emergency, I hereby authorize Broadwater Academy to take the necessary measures to have my child treated and I agree to be responsible for any medical expenses incurred.
7) I give authorization for the Pre-Kindergarten staff or the School Nurse permission to administer prescription and non-prescription drugs (including vitamins and aspirin) when I send them to school.
8) I agree to complete and return a Medication Permission Slip to my child's Pre-Kindergarten teacher with each medication (prescription and non-prescription) I send to school for administration to my child.
9) I understand that ALL medications will be sent home daily unless otherwise specified.
10) I understand that:
a. All medications must be in their original containers labeled with my child's name.
b. The dosage and time for administering must be on container label.
11) I agree to provide Broadwater Academy with a Physician's Health Form which includes up-to-date immunization records, completed by myself and my child's physician. (Pre-Kindergarten students only)
12) For verification purposes only, I agree to provide Broadwater Academy with my child's birth certificate or proof of birth for viewing.

SIGNATURES

Mother (print name) _____ Signature _____

Father (print name) _____ Signature _____

Director (print name) _____ Signature _____

Pre-Kindergarten Admission Date _____ Extended Care Admission Date _____

Pre-Kindergarten Termination Date _____ Extended Care Termination Date _____

FOR SCHOOL USE ONLY-DO NOT WRITE IN THIS AREA

- Birth Certificate information verified _____
• Physician's Health Form filed _____
• Allergy Information recorded _____
• All other information completed _____

Director (print name) _____ Signature _____
Date _____

Broadwater Academy Extended Care Policies and Procedures

(complete for Extended Care only-signature required at bottom of page)

Extended Care EMERGENCY PHONE NUMBER 757-414-3678 AFTER 3:30pm

Broadwater Academy's Extended Care Program is committed to extending to the children enrolled the care and guidance that is consistent with our school mission. Extended Care provides careful supervision of children in a setting that fosters self-esteem and friendships while providing enjoyable social play and study activities.

Admission

Students who are enrolled at Broadwater Academy's Full Day Pre-Kindergarten - Grade 4 are eligible for Broadwater Academy's Extended Care Program.

Fees and Charges

All billing is processed through the Business Office. Families have 3 options for payment:

Full Time: \$1,300.00 if paid in full prior to start or \$125.00 per month*

Part Time: \$385.00 per 35-day block paid in full prior to start (12:00-6:00pm days count as one day towards the 35-day block.)*

Drop-In: \$15.00 per child/regular school day, \$25.00 family maximum from 3:25-6:00pm

Specific dates from 12:00-6:00 pm- \$25.00/child regular school day/
\$35.00 family maximum

4:00 Special: \$4.00/child with \$8.00 family maximum

If the part-time or drop-in procedure is used, parents are requested to sign up their child on the first day of each week.

***Payment must be made prior to the start date for children registered for the Full and Part Time Programs with no reimbursements issued for unused days.**

If children are not picked up by 6:00pm each day, a late fee will apply.

- Late fee charges are as follows:

➤ 6:01-6:10pm \$10

➤ 6:11-6:20pm \$17

➤ 6:21-6:30pm \$25

If contact with the family has not been made by 6:31pm, the Northampton Department of Social Services will be contacted.

Staffing

The Extended Care Program is staffed by a director and part-time staff. The staff members report directly to the Dean of Faculty. The Dean of Faculty and all staff members are certified in CPR and First Aid.

Procedure for Signing In and Out

Broadwater Academy continues to ensure the safety of its students; therefore, persons must be listed on the registration form or verbal/written permission must be given by the parent or guardian to the Director of Extended Care or an Extended Care staff member to sign out any student. The registered person is required to come to the location of Extended Care to sign out any student as they are leaving the program. If a change in plans occurs during the hours of operation of Extended Care, the parent/guardian should call the EC emergency number (757-414-3678) to alert the staff member on duty. If the change in transportation is not someone listed on the child's application, the staff member will ask to see a photo ID of that person. No child will be released to anyone under the age of 18 years of age.

Times of Operation

The Extended Care Program runs from Monday-Friday from 3:25-6:00pm during the school year. On specific dates (as indicated on the school calendar), Extended Care will run from 12:00-6:00pm. Please understand that if school is closed or an unscheduled early dismissal occurs, the Extended Care Program will be CANCELLED and an alternate dismissal plan for your child must be arranged at that time.

Food

Students are expected to bring their own snack each day and lunch on those days that Extended Care begins at 12:00 pm.

Medication Policy

No medication will be given to any child during Extended Care hours.

Registration

All parents are required to complete the Pre-Kindergarten and/or Extended Care Registration Form **prior** to attending Extended Care. A certified copy of the child's birth certificate must be shown to Broadwater Academy's Director of Admissions.

Communication

Parents may reach an Extended Care staff member after 3:30pm at 757-414-3678. Parents are encouraged to communicate with staff members on a daily basis. Parents are informed of behavioral concerns and will receive an Occurrence Report if the staff member feels that it is necessary. If deemed necessary, an accident/injury form will be issued to the parent.

***Parent/Guardian Signature

Date

kd 8/23/10