

BOWMAN KIDS CLUB BEFORE & AFTER SCHOOL CARE

13777 Bowman Road

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**KIDS CLUB REGISTRATION APPLICATION (One per student)
2019-2020 FINANCIAL CONTRACT**

Program Requested (subject to space availability):

Transitional Kindergarten Students:

_____	Morning Care (6:30-8:00)	M T W TH F	(circle dates needed)	– Hot breakfast served
_____	Short Day Care (12:40-2:05)	M T W TH F	(circle dates needed)	
_____	Short Day Care (12:40-2:40)	M T W TH F	(circle dates needed)	
_____	Full Day/Minimum Days Care (12:40-6:00)	M T W TH F	(circle dates needed)	
_____	Staff Dev. Days & possible non-school Days (depending on interest)		(6:30am-6:00pm)	

Grades Kdg-6th:

_____	Morning Care (6:30-8:00)	M T W TH F	(circle dates needed)	– Hot breakfast served
_____	Short Day Care (1:30-2:05)	M T W TH F	(circle dates needed)	
_____	Short Day Care (1:30-2:40)	M T W TH F	(circle dates needed)	
_____	B&G Bus Care (2:05-2:40)	M T W TH F	(circle dates needed)	(includes snack)
_____	Full Day/Minimum Days Care (12:40-6:00)	M T W TH F	(circle dates needed)	
_____	Staff Dev. Days & possible non-school Days (depending on interest)		(6:30am-6:00pm)	

You will be notified upon approval by KIDS Club

Student Name: _____

Birth Date: _____ 2018/2019 Grade: _____ Gender: Male _____ Female _____

Home Address: _____

Mailing Address: _____

Mother/Legal Guardian: _____

Address (if different from student): _____

Home Phone: _____ Work: _____ Cell: _____

Father/Legal Guardian: _____

Address (if different from student): _____

Home Phone: _____ Work: _____ Cell: _____

Marital Status of Parents/Guardians: Married Divorced Separated Other

Siblings at Bowman Charter School:

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Bowman Charter School KIDS CLUB
Before & After School Care

Admission Agreement Form – 2018-2019

Child (ren)'s Name & Date of Birth _____

Parent's/Guardian Name (s) _____

Parent Handbook:

I (we) have received a copy of the Bowman Charter School KIDS CLUB Before & After School Day Care Parent Handbook. I (we) have read and understand its policies and procedures and agree to comply with the program rules and regulations. I understand that KIDS CLUB adheres to the Bowman Charter School Student/Parent Handbook.

(Initials)

Enrollment Fee:

I understand that I must submit the annual, non-refundable Enrollment Fee of \$25 for the family which will be charged the first month of enrollment.

(Initials)

Payment Dates:

Payments are due the 1st of every month for that month. Payment is considered late if not received by the 15th of that month. Failure to pay in a timely manner will interrupt child care. NSF checks will result in a \$30 charge and loss of service.

(Initials)

Term of this Admission Agreement:

This admission agreement is valid for one year from the date of signing or until that time that Center Policies change or Parent withdraws their child with 30 days written notice.

(Initials)

Returned Checks:

I understand that a processing fee of \$30 will be charged to my account for all checks that are returned for any reason. I understand that checks returned for insufficient funds will be automatically re-deposited. If more than two checks are returned within a calendar year, I will be subsequently required to pay by case, money order or cashier’s check.

(Initials)

Fees:

Registration Fee of \$25 per family. Billed in August with the first months payment.
Late fee of \$5.00 per minute past 6:00PM

Please see Rate Chart for Fees

(Initials)

Fees Specific to Your Child:

I understand that the daily fee for my child to attend the KIDS CLUB will be \$_____

(Initials)

Modification of Rates:

At least 30 days advance notice will be given to families prior to any rate changes.

(Initials)

Refund Policy:

In the event that a child is withdrawn from the center by the parents and with the required 30 days written notice, if there is an account balance, it will be refunded. And in the event that a child is asked to leave the center, refunds will be provided for the time that is missed. There is no refund for days missed for illness, doctor appointments, family necessity, etc.

(Initials)

When School is Closed:

I understand that the center will be closed on the following holidays as mentioned in the Parent Handbook: Labor Day, Veteran’s Day, Thanksgiving (Thursday & Friday), Christmas Eve and Christmas, New Year’s Eve and New Year’s Day, Dr. Martin Luther King Day, President’s Day, Washington’s Birthday, Memorial Day.

(Initials)

On a Day When Your Child Will Not Attend:

I understand that on a day when my child will not attend, it is my responsibility to notify Kids Club as soon as possible and that there will be no reduction in tuition fees for missed days.

(Initials)

Release of Children:

I understand that my child will be released only to myself, the other parent, a legal guardian (except where prohibited by state child care law or court order) and to those persons whose names I have listed on my child's emergency card. I understand that if someone other than child's parents/guardians is to pick up my child on a specific day, I must notify the Center, even if they are listed on the emergency card.

(Initials)

Emergency Contacts:

I understand that I am required to maintain at all times at least two additional emergency contacts other than me, including full names, home and work addresses and home and work phone numbers, including all cell phone numbers when possible. I understand that in the event of an emergency for which I cannot be reached and the emergency contacts cannot be reached, the staff may contact police or other emergency authorities.

(Initials)

Child Information:

I understand that it is my responsibility to inform the Center of any changes to the information on the Emergency Information Form, including but not limited to, address, home and work phone numbers, and pick up authorization and medical conditions.

(Initials)

In the Event of Illness:

KIDS CLUB adheres to the Bowman Charter School Health Policy. I understand that I will be contacted should my child become ill while at the Center and I agree to pick up my child promptly upon such notification. **I also understand that my child cannot attend the Center on a day in which he has been absent from school and/or is ill as defined in the Parent Handbook.**

(Initials)

In the Event of Communicable Disease:

I understand that I must inform the Center within 24 hours or the next business day after my child or any member of immediate family has developed any communicable disease. I also understand that life threatening diseases must be reported immediately.

(Initials)

In the Event of an Emergency:

In the event of an emergency, if I cannot be reached the Center has my permission to contact the physicians listed on my child's emergency card or have my child transported to a local hospital for care and I will not hold the Center or its employees liable. I understand that I am responsible for all expenses incurred.

(Initials)

In the Event of Violent or Unsafe Behavior:

I understand that I may be contacted should my child display violent, unsafe or continual inappropriate behavior and I agree to pick up my child promptly upon such notification.

(Initials)

Conditions Under Which this Agreement May be Terminated:

As mentioned above, the Center has the right to terminate an agreement and ask a child to withdraw enrollment when there have been the following:

- The child presents a health or safety threat
- Repeated discipline problems
- Lack of parental cooperation
- On-going late pick up
- Inappropriate parental behavior to teachers, staff or children at the Center
- Late payment of fees not paid by the 15th of the month

(Initials)

I have read, understand and will comply with the policies and procedures included in this Enrollment Agreement and in the Parent Handbook.

Director of KIDS CLUB Before & After School Care:

Signature and Date

Parent or Guardian: _____
Print Name

Signature and Date

Kids Club Use Only

Application Received Date _____ Initials: _____

Registration Fee (\$25 per family): Cash _____ Check# _____ Date: _____