



ENROLLMENT FORM

Child's Name _____

Sex _____ Age _____ Date of Birth _____

Entrance Date _____ **Withdrawal Date** _____

Home Address

Street

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Father's Name _____
Phone _____

Father's Home Address (if different than child's)

Street

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail _____

Father's Place of Employment _____

Work Phone _____

Street

City _____ State _____ Zip _____

Mother's Name _____
Phone _____

Mother's Home Address (if different than child's)

Street

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail _____

Mother's Place of Employment _____

Work Phone _____

Street _____

City _____ State _____ Zip _____

Child's Living Arrangements: (check one) Both Parents Mother Father

Child's Legal Guardian(s): (check one) Both Parents Mother Father

The child may be released to the person(s) signing this agreement or to the following:

Name _____ Phone _____

Address

Street _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Relationship to child _____

Relationship to Parent(s) or Guardian (if any) _____

The child may be released to the person(s) signing this agreement or to the following:

Name _____ Phone _____

Address

Street _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Relationship to child _____

Relationship to Parent(s) or Guardian (if any) _____

Persons to contact in the case of emergency when parent or guardian cannot be reached:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Name of Public or Private School child attends (if any):

Telephone _____

Name of Child's doctor or clinic:

Telephone _____

My child has the following special needs:

The following special accommodation(s) may be required to most effectively meet my child's needs while at Oak Grove Academy:

My child is currently on medication(s) prescribed for long-term continuous use and/or has the following preexisting illness, allergies, or health concerns:

EMERGENCY MEDICAL AUTHORIZATION

Should (*child's name*) _____

(*Date of birth*) _____ suffer an injury or illness while in the care of Oak Grove Academy, and the faculty or staff is unable to contact me (us) immediately, the faculty and/or staff of Oak Grove Academy shall be authorized to secure such medical attention and care for the child as may be necessary. I (We) shall assume responsibility for payment for services.

Parent/Guardian:

Signature

OGA Administrator/Person-In-Charge

Signature

Parental Agreements with Educational and Child Care Facility

Oak Grove Academy agrees to educate and provide child care for

from _____ AM to _____ PM

from _____ to _____ (Days of Week)

from _____ to _____ (Month to month)

My child will participate in the following meal plan (check applicable meals and snacks):

- Breakfast
- Morning Snack
- Lunch
- Afternoon Snack
- Evening Snack
- Dinner
- Bedtime Snack

AUTHORIZATION TO DISPENSE EXTERNAL PREPARATIONS

Should (*child's name*) _____

(*Date of birth*) _____, suffer an injury or illness while in the care of Oak Grove Academy, and the faculty or staff is unable to contact me (us) immediately, the faculty and/or staff of Oak Grove Academy shall be authorized to secure such medical attention and care for the child as may be necessary. I (We) shall assume responsibility for payment for services.

Parent/Guardian: _____
Signature

OGA Administrator/Person-In-Charge _____
Signature

Before any medication is dispensed to my child, I will provide a written authorization, which includes: date; name of child; name of medication; prescription number; if any; dosages; date and time of day medication is to be given. Medicine will be in the original container with my child's name marked on it.

I give Oak Grove Academy faculty and staff permission to apply one or more the following topical ointment(s) or preparation(s) to my child, in accordance with the directions on the label of the container:

- Baby Wipes
- Baby Powder
- Band aids
- Neosporin or similar ointment
- Bactine or similar first aid spray
- Sunscreen
- Insect Repellent
- Non-prescription ointment (such as A & D, Desitin, Vaseline)

My child will not be allowed to enter or leave the campus without being escorted by the parent(s), person authorized by parent (s), or Oak Grove Academy personnel.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g., telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunization records, etc.

Oak Grove Academy agrees to keep me informed of any incidents, including illnesses, injuries, adverse reactions to medications, etc., which may affect my child.

Oak Grove Academy agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water-related activities occurring in water that is more than two (2) feet deep.

I authorize the child care facility to obtain emergency medical care for my child when I am not available. I have received a copy and agree to abide by the policies and procedures for Oak Grove Academy.

I understand that the facility will advise me of my child's progress and issues relating to my child's care as well as any individual practices concerning my child's special needs. I also understand that my participation is encouraged in facility activities.

In-Home Babysitting, Child Care and/or Pedagogy

Oak Grove Academy does not render any of these services off premise, except in the event of field trips which have been authorized in advance by the parent. Oak Grove Academy staff members are prohibited from assuming such responsibility, as they have been selected, trained and retained based upon their capacity for rendering child care services in a fully supervised and controlled school environment. We offer no assurance of the fitness of academy staff members for the performance of these and other services (to include the transporting of children or caring for them in the home) when not environed by the experienced, professional management, faculty and staff of Oak Grove Academy.

Should a parent arrange with a staff member the off premises care of their child or children, both Oak Grove Academy and the parent are clear that the staff member takes upon themselves full responsibility for said service, thus placing in jeopardy their employment and the continued enrollment of the child at Oak Grove Academy. Due to potential conflict of interest, the parent may be requested to withdraw their child from the academy. Should a parent be requested to effect the withdrawal of their child from the academy, Oak Grove Academy and the parent agree that the parent will proceed to indemnify Oak Grove Academy with an immediate payment of the equivalent of three full months of their child's tuition, as reflected in the Admission form or contract.

Enrollment, Registration and Renewal Fee Policy

An initial registration fee of \$125.00 is due at the time of enrollment for each child. This initial registration fee will be waived, should Oak Grove Academy already have received said non-refundable fee from you at the time you reserved a place for your child or children.

A renewal registration fee of \$125.00 is due and payable for each child the first week of August.

A Summer Camp fee of \$70.00 is due and payable on the first Monday of June for each child enrolled in Summer Camp.

Tuition

The parent agrees to pay the amount of \$ _____ per _____.

Tuition and Fee Payment Policy

Parents are responsible for paying tuition on time.

Determined on an annual basis, tuition is due on first week of the term with a grace period until the 2nd week of the term, or payable monthly or weekly, and due in advance. There will be a late fee of \$250.00 assessed if tuition is turned in after the 2nd week of the term, \$100.00 will be assessed if monthly tuition is turned in after the fifth of the month, and \$35.00 if weekly tuition is turned in after Monday morning.

There will be a late fee of \$250.00 assessed if tuition is turned in after the 2nd week of the term, \$100.00 will be assessed if monthly tuition is turned in after the fifth of the month, and \$30.00 if weekly tuition is turned in after Monday morning.

There will be a late fee of \$50.00 assessed if the enrollment, registration, renewal is turned in after the fifth of the month, or the Summer Camp fee is turned in after the first Monday of June.

No more than three days may elapse, after which your child's enrollment may be suspended. Should your child's enrollment be suspended, you will remain responsible for the balance due and any expenses incurred by Oak Grove Academy in the pursuit of payment.

Parent Handbook

Parent/Guardian hereby declares they have received and read a copy of the Grove Academy Parent Handbook (<http://www.oakgroveacademy.org/documents/Parent-Handbook-Oak-Grove-Academy.pdf>).

Signed: _____ Date: _____
(Parent/Guardian)

Signed: _____ Date: _____
(Academy Administrator/Person-In-Charge)

Hours of Operation:

6:30 AM to 6:30 PM, Monday through Friday. We are closed for New Year's Eve, New Year's Day, Memorial Day, July 4th, Labor Day, Thanksgiving Day, the day after Thanksgiving, Christmas Eve and Christmas Day.