

Registration Packet

2011-2012 School Year

Learning for Life Preschool



YC Elementary School
420 S Third St Carlton, OR 97111
503.852.7161

Carlton Together Cares
226 E Main St. Carlton, OR 97111
503.852.4405

Learning for Life Preschool
PO Box 821 Carlton, OR 97111
learningforlifepreschool@gmail.com

Thank you for your interest in the Learning for Life Preschool. We look forward to becoming better acquainted as you explore our program. This packet is to inform you of the details of our preschool. You will want to keep the stapled portion of this packet for your own information and return the unattached documents.

At Learning for Life Preschool it is our goal to create pathways that lead children to develop positive attitudes toward themselves and toward everything associated with learning. We want to help build a creative foundation for a **lifetime of learning**. We help kids develop self-confidence; positive self-image; problem solving, social interaction, self-expression and good communication skills; creative expression; curiosity; persistence; initiative; and the ability to concentrate and organize.

To enroll your child in the Learning for Life Preschool, you must complete and return the registration documents, and pay a \$50 non-refundable deposit. This will ensure your placement. Please make checks out to Carlton Together Cares.

Forms and payment can be submitted to Yamhill Carlton Elementary School, Carlton Together Cares, or mailed to the Learning for Life Preschool. **All applications will be dated according to the date the deposit is received.** You will receive a confirmation email upon being accepted into our preschool program. Applications are accepted on a "first come" basis.

We are anticipating full classes for the 2011-2012 school year. Open Registration begins March 15th, 2011. Applications will not be accepted prior to this date. We are offering two preschool classes with 16 available spots per class. Once these are filled, we will begin a waiting list. We will consider offering an additional afternoon preschool class as our waiting list fills.

The Learning for Life Preschool has set up a scholarship fund for preschool families who qualify. Carlton continues to be a very generous community and has offered our preschool great support. If you are interested in applying for a scholarship, you will need to fill out a separate scholarship application that will be available on 7/1/11.

If you have any additional questions or concerns, please contact us at learningforlifepreschool@gmail.com

We are happy to listen and answer any additional questions.

Sincerely,

Amber Horne
Learning for Life Preschool
Director/Teacher

Learning for Life Preschool

Tuition Agreement

Child's Name: _____ Date: _____

Please indicate which preschool program you are registering your child for:

____ 3 year old class (Must be 36 months by Sept 1, 2011)

____ Pre-K class (Must be 48 months by Sept 1, 2011)

Class	Days	Time	Tuition	Tuition w/scholarship
3 yr old	T/Th	8:15 am – 10:45 am	\$70 per month	\$50 per month
Pre-K	M/W/F	8:15 am – 11:00 am	\$90 per month	\$70 per month

Tuition for the Learning for Life Preschool is based on a daily rate. The total numbers of school days is counted and divided by 9 months. Regardless of how many school days there are in a specific month, the tuition remains the same.

Payment due: Preschool tuition is due, on or before the 5th day of each month.

Late Payments: Please make arrangements ahead of time if payment will be late.

Otherwise, payments after the 5th will be considered late and will be charged a \$15.00 late fee.

Returned checks: are subject to bank fees. Returned checks must be redeemed with cash or a cashier's check within 24 hours of notification, or arrangements will be made to reprocess your check.

Payment Options: There are two tuition payment options.

1. 10% Discount (annual payment): Pay all tuition by September 1st and receive a 10% discount on tuition.
2. Pay tuition monthly by the 5th of each month.

Tuition checks should be made payable to "Carlton Together Cares". Tuition checks can be submitted in the drop box located at the preschool. You can also submit tuition to CTC by delivery or mail. If you choose to mail in your payment, please address the envelope as follows:

CTC: Learning for Life Preschool
PO Box 821
Carlton, OR 97111

I understand that my child may be withdrawn from the program for non-payment of my preschool bill. I understand that if my tuition becomes more than 60 days overdue, my child will be withdrawn from the Learning for Life Preschool. I have read and accept the conditions outlined in the **Registration Packet**, and the **Tuition Agreement**. This contract is effective for the duration of my child's enrollment at the Learning for Life Preschool.

Parent/Guardian Signature: _____ Date: _____

Learning for Life Preschool

Enrollment Form

Child's Name _____

Date of Birth _____

Place of Birth _____

Parent or Guardian's Information:

Parent or Guardian's Information:

Name _____

Name _____

Address _____

Address _____

Home Phone _____

Home Phone _____

Cell Phone _____

Cell Phone _____

E-mail _____

E-mail _____

Emergency Contact #1:

Emergency Contact #2:

Contact Name _____

Contact Name _____

Address _____

Address _____

Telephone _____

Telephone _____

Relationship _____

Relationship _____

Other Adults Authorized to pick up your child(ren):

Name _____ Relationship _____ Phone _____

Is there anyone who has a legal restraining order prohibiting or limiting contact with your child?

Yes No If yes please list his/her name and attach the required documentation.

Name _____ Relationship to child _____

Are there any custody or visiting arrangements we need to be aware of? _____

Parent Signature: _____ Date: _____

Learning for Life Preschool

Developmental History and Background Information

Child's Name _____ Date of Birth _____

Health:

Special physical conditions, disabilities: _____

Allergies i.e. asthma, hay fever, insect bites, medicine, or food reactions: _____

Regular Medications: _____

Eating Habits:

Special Diet _____

Toilet Habits:

How does your child indicate their bathroom needs? _____

Does your child ever have accidents? _____

Social Relationships:

How would you describe your child? _____

Reactions to strangers? _____

What are your child's favorite toys or activities? _____

What does your child fear (dark, spiders)? _____

How is your child comforted? _____

How does your child express anger and frustration? _____

What would you like your child to gain from his/her preschool experience? _____

Is there anything else you would like us to know about your child? _____

Parent/Guardian Signature: _____ Date: _____

Learning for Life Preschool

Emergency Care—Authorization and Consent Form

Child's Name _____

I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child (name) _____ however, if I cannot be reached, I hereby authorize the Learning for Life preschool to transport my child to the hospital and to secure for my child the necessary treatment. I understand the teachers at the preschool are trained in the basics of first aid and I authorize them to give my child first aid and CPR when appropriate.

Parent/Guardian's Signature _____ Date _____

Learning for Life Preschool

Emergency Evacuation Information Sheet

Child's name: _____ Date of Birth: _____

Parent/Guardian: _____ Parent/Guardian: _____

Contact Number: _____ Contact Number: _____

Back up/ emergency people and phone numbers who are authorized to pick up your child in case of an emergency if parents/guardians can't be reached:

Name: _____ Relationship: _____

Contact Information: _____

Name: _____ Relationship: _____

Contact Information: _____

If emergency medical care is necessary, I give the Learning for Life Preschool, it's staff, and/or it's management permission for any treatment deemed necessary.

Parent/Guardian Signature: _____ Date: _____