



## Calvary Child Development Center

Confirmation # \_\_\_\_\_

## PART-TIME TK AND KINDERGARTEN APPLICATION

\*Please fill in every blank in print.

Office Use Only

Check \_\_\_\_\_

Date \_\_\_\_\_

Amt. \_\_\_\_\_

Dt. of Enrol. \_\_\_\_\_

Rm # \_\_\_\_\_

REVISION 12/14/15

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
(Last) (First) (MI)Preferred Name \_\_\_\_\_ Sex ☐ Male ☐ Female Race \_\_\_\_\_  
(First name you would like us to call your child.)Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

\*\*Best Email Address \_\_\_\_\_

## INFORMATION ABOUT THE FAMILY

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_ \*\*Cell Phone \_\_\_\_\_

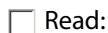
Address \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_ \*\*Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Marital Status ☐ Married ☐ Separated ☐ Divorced ☐ Single ☐ Widowed/er\*\*Email Addresses \_\_\_\_\_  
(Mother's Best or Work) (Father's Best or Work)

Read:

**\*\*It is very important for us to have valid email addresses and cell phone numbers on file.  
In the event of an emergency we may use an Email and/or Text Blast. Please update as needed.**

## EMERGENCY CONTACT

List two people, **other than parents**, who we can contact and/or release your child to, who live LOCALLY, in case of emergency.

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Best Contact # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Best Contact # \_\_\_\_\_

SELECT YOUR PREFERENCE BELOW. Place a check next to the correct age level, and select number of days carefully.

*For your child to be accepted into our program, they must be 5 by August 31.*

## SELECT YOUR PREFERENCE BELOW.

Place a check next to either TK or Kindergarten.



5 Year Old Class

☐ Transitional Kindergarten☐ KindergartenCalvary  
Child Development Center**Preschool tuition is  
calculated at a yearly rate,**  
with options of paying your  
tuition either yearly or in  
10 equal payments.  
\*See attached Contract of  
Enrollment for details.

I agree that the operator may authorize the physician of his/her choice to provide emergency care in the event that neither the family physician nor I can be contacted.

(Signature of Parent)

(Date)

I, as the operator, do agree to provide transportation to an appropriate medical resource in the event of emergency. In an emergency situation, a responsible adult will supervise other children in the facility. I will not administer any drug or medication without specific instructions from the physician or the child's parent, guardian, or full time custodian. Provisions will be made for adequate and appropriate rest and outdoor play.

(Signature of Director)

(Date)

## EMERGENCY CARE INFORMATION

Known Allergies \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Office Phone \_\_\_\_\_

Address \_\_\_\_\_

Dentist or Parent's Dentist \_\_\_\_\_ Office Phone \_\_\_\_\_

Address \_\_\_\_\_

Hospital Preference ☐ CMC (704.355.2000) ☐ CMC Pineville (704.667.1000) ☐ Presby Main (704.384.4000) ☐ Presby Matt (704.384.6500)

Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Does your child have any health issues that are important for teachers to be aware of? ☐ No ☐ Yes If yes, please explain below:Does your child take any prescription medication on a regular basis? ☐ No ☐ Yes If yes, please explain below:

From the list below, please check three personality traits that you would say best describe your child's personality.

- |                                    |                                     |                                    |  |                                    |                                    |
|------------------------------------|-------------------------------------|------------------------------------|--|------------------------------------|------------------------------------|
| <input type="checkbox"/> Spirited  | <input type="checkbox"/> Stubborn   | <input type="checkbox"/> Lively    | <input type="checkbox"/> Calm          | <input type="checkbox"/> Shy       | <input type="checkbox"/> Impetuous |
| <input type="checkbox"/> Dramatic  | <input type="checkbox"/> Assertive  | <input type="checkbox"/> Willful   | <input type="checkbox"/> Diligent      | <input type="checkbox"/> Fragile   | <input type="checkbox"/> Confident |
| <input type="checkbox"/> Compliant | <input type="checkbox"/> Intense    | <input type="checkbox"/> Jovial    | <input type="checkbox"/> Independent   | <input type="checkbox"/> Cautious  | <input type="checkbox"/> Congenial |
| <input type="checkbox"/> Observant | <input type="checkbox"/> Easy Going | <input type="checkbox"/> Talkative | <input type="checkbox"/> Perfectionist | <input type="checkbox"/> Impulsive |                                    |

Siblings	Name: _____	Age: _____	School: _____
	Name: _____	Age: _____	School: _____
	Name: _____	Age: _____	School: _____

Name of Church Where Family Worships Regularly \_\_\_\_\_

Present School and Teacher/Room Number \_\_\_\_\_

Child's Appetite ☐ Good ☐ Fair ☐ Poor How many hours of sleep does your child get at night? \_\_\_\_\_

## INTELLIGENCE &amp; PSYCHOLOGICAL ASSESSMENTS • Threes PRE-K through KINDERGARTEN APPLICANTS ONLY

Although Calvary Child Development Center does not require testing as part of our admission process, we encourage parents to share any previous assessments with this application as this helps us better understand your child. This information is kept confidential and is used to assess whether our program meets your child's emotional/social, academic and physical needs.

Has your child been professionally assessed for learning differences, behavior problems or any other psychological conditions? (anxiety, etc).

☐ No ☐ Yes If yes, please explain.

Has your child been professionally assessed for accelerated learning, or advanced intellectual capacities?

☐ No ☐ Yes If yes, please explain.May we have permission to consult with appropriate professional resources concerning the above challenges or assessments? ☐ No ☐ Yes  
(Please include copies of assessments with this application.)

Name \_\_\_\_\_ Email \_\_\_\_\_ Phone Number \_\_\_\_\_

Has your child been expelled from, or had other serious disciplinary difficulty in school?

☐ No ☐ Yes If yes, please explain.

Has your child ever been withdrawn from any other school for any reason?

☐ No ☐ Yes If yes, please explain.

**TK/K**

Part Time

# Calvary Child Development Center

Please check and initial each box to denote that you have read and understood the CDC Policies.  
Then fill in the **SIGN and DATE** box at the bottom.

☐

Check

☐

Initial

## DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY

I have read and understand the facility's Discipline and Behavior Management Policy, which is on **Page 5** of this application, and the facility's director/coordinator (or other designated staff member) has discussed the facility's Discipline and Behavior Management Policy with me, if requested.

☐

Check

☐

Initial

## DIRECTOR DISCRETION REGARDING CONTINUED ENROLLMENT

I have read and understand the Director Discretion Regarding Continued Enrollment Policy on **Page 5** of this application.

☐

I do hereby state that my child is in good health and is physically able to participate in all activities at Calvary Child Development Center.

☐

Check

☐

Initial

## KEY FOB POLICY

I have read and understand the Security procedures on **Page 5** of this application, and acknowledge our responsibilities concerning those procedures.

☐

Check

☐

Initial

## PHOTO RELEASE POLICY

I have read and understand the Photo Release Policy on **Page 6** of this application and I select

☐ Yes or ☐ No for consent.

☐

Check

☐

Initial

## PEANUT FREE POLICY

I have read and understand the Peanut Free Policy on **Page 6** of this application and acknowledge that Calvary Child Development Center is a Peanut Free School.

☐

Check

☐

Initial

## PLAYGROUND POLICY

State law requires that parents must approve of their child walking or playing outside fenced areas. Some preschools and day care centers have doors that open directly to fenced playgrounds. However, owing to the size and original construction of our building and the location of our playgrounds, parent consent is required.

☐

I will allow my child to walk or play outside the fenced area. This authorization is valid from 8/22/2016 - 9/1/2017

## SIGN AND DATE

I, the undersigned parent or guardian of \_\_\_\_\_ (child's full name), do hereby state that I have read each statement above and understand the policies, laws, and regulations.

**\*\*\* Please check & initial each box, then sign and date below before submitting application. \*\*\***

DATE OF CHILD'S ENROLLMENT (First Day of Attendance)

PRINT PARENT'S NAME Clearly

Signature of Parent (or Legal Guardian)

Date

Accepted By – Signature of Executive Director

Date

Did you read all pages? Page 4 is the Contract of Enrollment. For your application to be complete, you must fill in all of the blanks. You must read, sign, and date pages 1, 3, and 4. Please print these forms to be turned in as per directions outlined on the website at [www.calvarycdc.com](http://www.calvarycdc.com) under the Enrollment Section.

# Calvary Child Development Center

**TK/K**  
Part Time

## CONTRACT OF ENROLLMENT for ALL KINDERGARTEN & TRANSITIONAL KINDERGARTEN • PART TIME 2016– 2017 SCHOOL YEAR

*To be completed upon enrollment. Signing this agreement does not guarantee admission or continued enrollment in the program.*

1. The Enrollment Fee of \$240 is to be paid at time of enrollment. This fee is not credited to tuition or daycare payment. The Enrollment Fee is NOT refundable.
2. Payment may be made by cash, check or credit card. We accept all major credit cards. An ACH bank draft or an automatic credit card payment plan may be set up at your request.
3. Students are expected to be enrolled for the entire school year, from August to May. Therefore, you will be responsible for the tuition for that same time period.
4. Should you have to withdraw your student for any reason during the school year, a written notice to the Business Office is required at least 2 weeks prior to the withdrawal date. For example, if you need to withdraw your child by October 30th, the Business Office would need to be notified in writing by October 15th. You will be responsible for the 2 weeks tuition from the date the Business Office is notified.
5. A student will not be permitted to enter or continue in our program if any of his/her tuition, daycare fees or other charges are delinquent as determined by the business office.
6. Sick Days/Holidays/Snow Days/Unexpected Closures. We cannot give credit for days your child misses due to illness; we do not give credit for holidays when the center is closed - our staff is paid for holidays and we cannot absorb this cost; we do not give credit given for snow/inclement weather days when the center closes early, or when the center closes for an entire day, nor do we give credit if the center is closed due to circumstances beyond our control (i.e. water main breaks, etc.)
7. The school is not responsible for damages to or loss of any personal items.
8. Due to limited spaces in our Transitional Kindergarten and Kindergarten programs, we require a non-refundable, non-transferable reservation deposit due by June 1, 2016 for all students enrolling in Transitional Kindergarten and Kindergarten. For students participating in our 8:30am -1:30pm program, this reservation fee of **\$613 for Transitional Kindergarten** and **\$643 for Kindergarten** will be due in addition to the enrollment fees. This fee will be the first of your 10 equal tuition payment  
***If we do not receive this payment by June 1, the spot will become available for the next applicant.***
9. All charges shall be due and payable in accordance with the terms of this agreement without regard to absence.
  - ☐ (a) I will pay the balance of my full annual preschool tuition or daycare fee by August 1, 2016.
  - ☐ (b) I will pay my annual tuition fee in 10 equal payments beginning June 1, 2016. Subsequent payments will be due on the first day of each month beginning September 1, 2016, with the last payment due May 1, 2017.

### I agree that:

- A. The selected payment plan and associated terms of payment as indicated have been fully disclosed.
- B. Failure to fulfill the attached agreement or make payments when due will constitute default. Any fees incurred by the school in the collection of amounts due will be the responsibility of the parents or guardian responsible for submitting this Contract of Enrollment.

\_\_\_\_\_  
**PRINT NAME** Clearly

\_\_\_\_\_  
Signature of Parent (or Legal Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Accepted By – Signature of Executive Director

\_\_\_\_\_  
Date

### REGISTRATION FEE MUST ACCOMPANY APPLICATION

**Please make checks payable to: Calvary Child Development Center (CCDC)**

*In order for this application to be complete, all fields must be filled in, and you must sign and initial where indicated on pages 1, 3 and 4. Please turn in this application to the preschool office as per directions of the CCDC director or registrar, or those found outlined on the [www.calvarycdc.com](http://www.calvarycdc.com) website underneath the Enrollment tab.*

**DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY**

Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following discipline and behavior management policy.

We:

1. DO praise, reward, and encourage the children.
2. DO reason with and set limits for the children.
3. DO model appropriate behavior for the children.
4. DO modify the classroom environment to attempt to prevent problems before they occur.
5. DO listen to the children.
6. DO provide alternatives for inappropriate behavior to the children.
7. DO provide the children with natural and logical consequences of their behaviors.
8. DO treat the children as people and respect their needs, desires, and feelings.
9. DO ignore minor misbehaviors.
10. DO explain things to children on their levels.
11. DO use short supervised periods of "time-out": ("Time-out" is described below)
12. DO stay consistent in our behavior management program.

We:

1. DO NOT spank, shake, bite, pinch, push, pull, slap, or otherwise physically punish the children.
2. DO NOT make fun of, yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse the children.
3. DO NOT shame or punish the children when bathroom accidents occur.
4. DO NOT deny food or rest as punishment.
5. DO NOT relate discipline to eating, resting, or sleeping.
6. DO NOT leave the children alone, unattended, or without supervision.
7. DO NOT place the children in locked rooms, closets, or boxes as punishment.
8. DO NOT allow discipline of children by children.
9. DO NOT criticize, make fun of, or otherwise belittle children's parents, families, or ethnic groups.

**"Time-out"**

"Time-out" is the removal of a child for a short period of time (3 to 5 minutes) from a situation in which the child is misbehaving and has not responded to other discipline techniques. The "time-out" space, usually a chair, is located away from classroom activity but within the teacher's sight. During "time-out," the child has a chance to think about the misbehavior which led to his/her removal from the group. After a brief interval of no more than 5 minutes, the teacher discusses the incident and appropriate behavior with the child. When the child returns to the group, the incident is over and the child is treated with the same affection and respect shown the other children.

*Adapted from original prepared by Elizabeth Wilson, Student, Catawba Valley Technical College*

**DIRECTOR DISCRETION REGARDING CONTINUED ENROLLMENT**

Once your child has been in attendance in our program for one month he or she will be assessed by our director and staff to determine if Calvary is the best fit for your child and their individual needs. At the conclusion of this assessment, the director shall have the right to determine whether continued enrollment at Calvary is appropriate for your child. In the event the director determines that Calvary is not the appropriate program for your child, she will recommend other options or placements for your child and the contract of enrollment will be terminated. The decision to terminate enrollment shall be at the sole discretion of the director and will be communicated to you.

The director also reserves the right to deny admittance or to revoke or suspend enrollment of a child, at her discretion, for reasons including, **but not limited to**, the following:

- Non-payment of tuition;
- Lack of immunizations;
- Child's repeated disruptive behavior;
- Child's repeated violent behavior;
- Lack of cooperation with center staff by student or parents;
- Developmental or health needs of the child which, in the discretion of the director, cannot be met at Calvary Child Development Center within its existing structure or procedures;
- Temporary health needs, conditions or periods of recuperation which the director determines would require a leave of absence until resolved.

**KEY FOB POLICY**

Calvary CDC has instituted a swipe system. I will receive 2 Calvary CDC ID fobs for security purposes. I will need to bring my key fobs each time I enter the building through the preschool entrance, and as I enter each hallway in the building. Security fobs will be given to me at Open House, and additional fobs may be ordered any time from the preschool office. The original key fobs I receive are assigned to my child for the duration of their time at Calvary CDC; fobs are not reassigned from year to year. I will keep fobs as long as my child remains at CCDC, and return any key fobs in my possession when my child will be permanently leaving Calvary CDC. At the time of termination, I will return the fobs to the first floor preschool office.

If I should lose one of the fobs, or if it is stolen, I must report it immediately to Julie Forlenza at 704.887.3677 or jforlenza@calvarycdc.com. If I should have to replace a lost or stolen fob, I understand \$25 will be charged to my child's account.

**Please read these policies, then check and initial the appropriate boxes on Page 3, and sign/date the bottom of that page.**

# Calvary Child Development Center

## Photo Release Policy

### Photo Release Information

Dear Parent, Like you - we're shutterbugs! We love taking pictures of your wonderful kids during activities, and we use these photos in a variety of ways. We pin them to our school bulletin boards, we make class albums, we often share them with you, and from time to time, we put pictures on our website or in printed materials.

However, we are sensitive to the fact that some of you might prefer not to have your child be in a picture from the CCDC. We will certainly honor those requests. Please review the form below and check and initial the correct section. Then sign the master signature form. This form tells us whether or not we can use your child's photo and gives us permission to use photos. As we are a not-for-profit organization, we only use photos for CDC-specific materials and never for items for sale.

Thank you for your assistance!

Serving Christ at Calvary,  
Pat Collins  
Director, Calvary Child Development Center

### Consent and Release Form

I do hereby grant to Calvary Child Development Center, a ministry of Calvary Church of Charlotte, North Carolina, the unlimited right to use, reproduce, and/or publish photographs and likenesses of my child for the internal or external promotional and informational activities of Calvary Child Development Center.

I agree to allow my child's photograph, voice and/or likeness to be published in various forms and mediums, including but not limited to, the Calvary Child Development Center internet/intranet web sites, publications, slides, advertisements, brochures, and video presentations.

I further understand that by signing this release, I waive any rights to inspect or approve any of the above stated material(s) and I waive any and all present or future compensation rights to the use of the above stated material(s).

I hereby release, discharge, and agree to hold harmless Calvary and its associated ministries and their respective directors, officers, members, agents, and employees from and against any liability and from any and all claims, actions, and demands, including, but not limited to claims of infringement, libel, defamation, or invasion of privacy, arising out of or in connection with the use of any of the above stated material(s).

## Peanut Free Policy

Calvary Child Development Center is a peanut free childcare center. Some of our children are allergic to peanuts and if in the presence of peanuts they could have a life threatening allergic reaction. In order to provide the safest possible environment for all of our children, we will ask that students bring no foods that contain peanuts into the school.

This is an issue that must be taken very seriously when the population we serve cannot yet self-advocate or read packaging. For this reason, we feel that this is a necessary step to be taken for the protection of children in the Child Development Center.

While we cannot absolutely ensure that our school will be 100% peanut free, we will drastically diminish the possibility of a child having an allergic reaction due to coming in contact with peanuts. We understand that the "no peanut butter at school" policy will be difficult for some of our children and families. We are very hopeful that through activities in our classrooms and discussions at home as a family about peanut allergies, that our children will begin to understand the importance of going peanut free. This is chance for our children to learn more about being inclusive to others needs, and their role in supporting neighbors in the community.

We thank all of our families and staff for their cooperation in upholding this policy.

Serving Christ at Calvary,  
Pat Collins, Calvary Child Development Center Director

**Please read these policies, then check and initial the appropriate boxes on Page 3, and sign/date the bottom of that page.**



# KEY COMMUNICATION

We want to keep our lines of communication as open as possible. We know that your children are very young and unable to communicate much information to you, and notes and verbal information often get lost and forgotten. We have four main avenues that we use center-wide to communicate with you. If you will make sure that you are aware of these, and also take the time to sign up for the text and email updates you see below that will be pushed to your contact preferences, it will help you stay informed. This is also how we will communicate in the event of emergencies and weather closings.

## 1. Sign Up to receive TEXT updates for TK and K (8:30-1:30)

Text the following: [@calvarypre to 81010](https://www.calvarycdc.com)

## 2. Sign up to receive our monthly EMAIL updates



If you are not already receiving our emails, follow this [>>link](#) to receive email updates from Calvary CDC.

[<<Or, use this QR Code](#)

## 3. Calvary Child Development Center Website



[www.calvarycdc.com](http://www.calvarycdc.com)

Here you will find the school menus, calendars, and updated info about happenings.

## 4. Find us on Facebook

Like us at [www.facebook.com/CalvaryCDC](https://www.facebook.com/CalvaryCDC)

Here's where you'll find updated info and pictures of special events.



# 2016 – 2017 Calendar

AUGUST 22	FIRST DAY OF NEW SCHOOL YEAR
SEPTEMBER 5	LABOR DAY • <b>CENTER IS CLOSED</b>
OCTOBER 10	COLUMBUS DAY • <b>CENTER IS CLOSED</b>
NOVEMBER 11	VETERAN'S DAY • <b>CENTER IS CLOSED</b>
NOVEMBER 23, 24, & 25	THANKSGIVING HOLIDAYS • <b>CENTER IS CLOSED</b>
DECEMBER 19-30	PRESCHOOL CHRISTMAS BREAK (Preschool 9am-1pm classes will not be in session) Full-Time <b>DAYCARE continues</b>
DECEMBER 23 & 26-27	CHRISTMAS HOLIDAYS • <b>CENTER IS CLOSED</b> (Full-Time 7am-6pm classes will not be in session)
JANUARY 2	NEW YEAR'S HOLIDAY • <b>CENTER IS CLOSED</b>
JANUARY 3 - 31	REGISTRATION FOR CURRENTLY ENROLLED STUDENTS & SIBLINGS FOR THE 2017-2018 SCHOOL YEAR
JANUARY 16	MARTIN LUTHER KING DAY • <b>CENTER IS CLOSED</b>
FEBRUARY 1	REGISTRATION OPENS ONLINE FOR NEW STUDENTS
FEBRUARY 2	REGISTRATION COMPLETION DATE FOR NEW STUDENTS
FEBRUARY 20	PRESIDENT'S DAY • <b>CENTER IS CLOSED</b>
APRIL 10 – 17	SPRING BREAK FOR PRESCHOOL CLASSES (Preschool 9am-1pm classes will not be in session)
APRIL 14 & 17	EASTER BREAK FOR DAYCARE • <b>CENTER IS CLOSED</b>
MAY 29	MEMORIAL DAY • <b>CENTER IS CLOSED</b>
JUNE 2	LAST DAY OF SCHOOL FOR PRESCHOOL
JULY 4	INDEPENDENCE DAY • <b>CENTER IS CLOSED</b>

**\*THE CENTER WILL BE CLOSED ON SNOW DAYS AS THE WEATHER DICTATES.  
ENROLL IN OUR TEXT BLAST SYSTEM TO RECEIVE WEATHER RELATED UPDATES AND CLOSINGS,  
MAKE SURE YOU'RE IN OUR EMAIL DATABASE, OR CHECK OUR FACEBOOK OR WEBSITE AT  
WWW.CALVARYCDC.COM FOR CLOSING INFORMATION. ANNOUNCEMENTS WILL ALSO BE MADE ON  
WBTV & WSOC TV, and FOX AFFILIATE News 14, OR YOU MAY CALL 341-5361/341-5335 FOR INFORMATION.**