



Start Date: _____

335 5th Avenue | Moline, Illinois 61265

Enrollment Agreement

Child Information

Last Name: _____ First Name: _____
Gender: Male Female Date of Birth: _____

Parent/Guardian Information

Mother's Contact Information

Last Name: _____ First Name: _____
Home Address: _____
Address City/State Zip
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Cell Phone Carrier: _____
Employer: _____ Work Phone: _____
Work Address: _____
Email: _____

Father's Contact Information

Last Name: _____ First Name: _____
Home Address: _____
Address City/State Zip
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Cell Phone Carrier: _____
Employer: _____ Work Phone: _____
Work Address: _____
Email: _____

Legal Guardian's Contact Information (if applicable)

Last Name: _____ First Name: _____
Home Address: _____
Address City/State Zip
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Cell Phone Carrier: _____
Employer: _____ Work Phone: _____
Work Address: _____
Email: _____

Person(s) Authorized to Pick Up Child and/or Notify in Case of Emergency
(Family and Non-Family Members)

Name: _____	Phone: _____	Relationship: _____
Name: _____	Phone: _____	Relationship: _____
Name: _____	Phone: _____	Relationship: _____
Name: _____	Phone: _____	Relationship: _____
Name: _____	Phone: _____	Relationship: _____

Family Doctor

Doctor's Name: _____

Office Address: _____ Phone: _____

Permission for Use of Photographs

Photographs and videos of the children participating in Esperanza Child Care Center may be taken from time to time and may appear in newspapers, magazines, brochures, or other marketing materials. In addition, Esperanza Child Care Center has security cameras in every children's classroom and hallway that are recording 24/7 and stored for approximately 1-2 weeks for security purposes. By enrolling your child, you grant permission for photographs, video, and security camera footage to be taken and used without compensation by Esperanza Child Care Center and HopeWorks.

Guidance and Discipline

At all times, the staff of ECCC will adhere to the Department of Children and Family Services (DCFS) guidance and discipline policy. (Section 407.270).

First and foremost positive reinforcement will be used. Redirection and simple, clear verbal directions will be used with negative student behavior. If further intervention on behalf of the staff is necessary, a timeout (one minute per age of the child) will be used. If continued negative behavior is displayed, a student may be removed to the center director's office. A student who is unable to control his/her behavior at this point may be sent home with a parent or guardian. This will be used as a last resort, and only to ensure the safety of the individual student and the other students at ECCC. The ECCC staff will use 123 Magic as a training resource.

Center Rules

- | | |
|---------------------------|--------------------------------------|
| 1. We listen to teachers | 2. We play safely. |
| 3. We are nice to others. | 4. We help keep our classroom clean. |

These rules will be reviewed daily in the classroom. The center's staff will be responsible for implementing the rules and following discipline procedures. The staff will report negative behaviors to the parent in the daily note home. We encourage parents to review the rules at home with their child. When necessary, parents and staff may meet to discuss behavior concerns. Parents are also welcome to request a meeting with their child's teacher and/or ECCC director. Children will review the rules daily in their classrooms. Children will be encouraged to take responsibility for their actions and make positive behaviors choices throughout the day. Consequences for significant violation of these rules may result in dismissal from ECCC. Any student that receives five (5) or more office "time-outs" may be dismissed from ECCC. Flagrant violations may result in expedited dismissal. Parents will be contacted by the director each time a student has earned an office "time-out". On occasion it may be determined that a student is not benefiting from the educational opportunities at ECCC. If at any time this is considered to be the case, the staff of ECCC and the parents of the child will meet to discuss options. Students may be removed from ECCC if it is decided that an alternative educational arrangement would better suit the child. ECCC will assist in the transition to a new educational setting if necessary.

I have read, understand and agree to adhere to the ECCC Guidance and Discipline Policy.

_____ (Initial Here)

Health Requirements

It is the responsibility of the parent to notify ECCC when their child is absent due to illness. Children who display obvious symptoms of illness, such as high fever or vomiting during the course of the day, will become ineligible for services and will be required to leave the facility. In this situation, the child will be isolated from the other children and the parent/guardian will be contacted for immediate pickup. Children must be fever-free, without the aid of medication for 24 hours before returning to school. A doctor's certificate is required for re-entry after any medical absence.

ECCC is to be advised of all allergies. Medication must be administered by the parent or designated guardian only. ECCC staff is prohibited from administering medication without prior written authorization from the parent whether it is prescribed or non-prescribed by a physician. Medication will only be administered as prescribed on the container. Medication must be administered by the parent or assess their child's tolerance prior to any staff member administering it to a child. Parents must assure staff of at least a 48-hour record of tolerance.

In the event of an emergency, paramedics will be called and the parents/guardian will be immediately notified. An ambulance will transport the child to the nearest medical facility. Emergency treatment will include but not limited to:

- Broken bones
- Extreme fever
- Head injuries followed by vomiting and/or dizziness
- Unconsciousness
- Large and/or deep cuts
- Seizures

I have read, understand and agree to adhere to the ECCC Health Requirements Policy.

_____ (Initial Here)

Communication

Most communication will come in the form of in-person meetings, phone calls or notes home. If you have concerns or questions at any time, please write a note or call the school. Your child's teacher will give out more specific classroom information.

Financial Obligation Agreement

Please read this agreement in its entirety. My signature below acknowledges...

- I have received and understand all of the information contained in the admissions/registration materials pertaining to current tuition and fee information and financial obligations.
- I understand, agree and adhere to all financial requirements, established payment due dates, fees and penalties.
- I understand and agree that registration, tuition, co-pays, and fees are nonrefundable
- I understand and agree that my child will be officially enrolled upon payment of registration/enrollment fees.
- I understand and agree that my child may become ineligible for educational services or any school-related activity when tuition/fee payment becomes eight (8) days past due.
- I understand and agree that in the event that I do not meet my financial obligations that my credit rating may be adversely affected.
- I understand and agree that my tuition account will be assessed a late fee as outlined in the even that I pick up my child after 5:00pm unless s/he is registered for late pick-up options.

Signature of Financially Responsible Person

Date

Printed Name of Financially Responsible Person

Signature of Financially Responsible Person

Date

Printed Name of Financially Responsible Person