

4 digits Time Clock ID Pin: _____

GENERAL RECORD AND STATEMENT OF



CHILD'S HEALTH FOR ADMISSION TO CHILD CARE FACILITY

This form is to be completed for each child at the time of enrollment in the child care facility, updated as needed when changes occur, and maintained on file at the facility.

GENERAL INFORMATION: (to be completed by Parent or Guardian)

Name of Facility: Magnanimous Kids EXPLORATORY Learning Center County: Richland
Address: 209 Rice Creek Farms Rd. Columbia, SC 29229
Street Address – no Post Office Boxes City, State, Zip

Child's Name: _____
Last First Middle Initial Nick Name

Date of Birth: _____ Enrollment Date: _____

Child's Current Home Address: _____
Street Address City, State, Zip

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

You must have two individuals who have the authority to obtain emergency medical treatment for the child.

1. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

2. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

Is Child currently enrolled in school? (5K up to 6 years old) Yes No

My Child will regularly attend this facility FROM _____ am/pm TO _____ am/pm

If Child is a drop-in, indicate hours of care: FROM _____ am/pm TO _____ am/pm

Check all days Child will regularly attend this facility: Mon Tue Wed Thurs Fri Sat • Sun

Check all meals Child will receive daily: • Meals are not offered Breakfast Morning Snack Lunch
 Afternoon Snack • Dinner • Evening Snack

HEALTH INFORMATION: (to be completed by Parent or Guardian)

Family Physician or Health Resource: _____
Name

Street Address City, State, Zip Telephone

Emergency Care Provider: _____
Emergency Facility Name

Street Address City, State, Zip Telephone

Dental Care Provider: _____
Name

Street Address City, State, Zip Telephone

Health Insurance Provider: _____

Certificate of Immunization: Yes No N/A please explain: _____

My child has the following health conditions such as allergies, asthma, diabetes, epilepsy, etc., and/or takes the following medications on a regular basis:

Additional Comments: _____

I certify that to the best of my knowledge _____
Child's Name

is in good mental and physical health and able to participate in the child care program at

Magnanimous Kids EXPLORATORY Learning Center

Name of Childcare Facility

Signature: _____ Date: _____
Parent or Guardian

Signature: _____ Date: _____
Director/Operator/Staff Designee

Magnanimous Kids **EXPLORATORY** Learning Center

209 Rice Creek Farms Rd.

Columbia, SC 29229

Enrollment/Registration Form

4 digits Time Clock ID Pin: _____
(Center will Provide)

Parent's Contact Information

Mother/Guardian Info:

Full Name: _____

Driver's License #: _____

Email: _____

Employment: _____

Employer's Address: _____

Father/Guardian Info:

Full Name: _____

Driver's License #: _____

Email: _____

Employment: _____

Employer's Address: _____

Authorization for Child Pick-up (Parent's excluded)

Children will not be released to anyone w/out written consent; any person picking up the child who is unknown to Magnanimous Kids is required to **Show Picture ID. (NO EXCEPTIONS)**

| |
|---|
| 1. Name: _____ Relationship: _____ Phone: (____) _____ - _____ Address: _____ City: _____ State: _____ Zip _____ |
| 2. Name: _____ Relationship: _____ Phone: (____) _____ - _____ Address: _____ City: _____ State: _____ Zip _____ |
| 3. Name: _____ Relationship: _____ Phone: (____) _____ - _____ Address: _____ City: _____ State: _____ Zip _____ |
| 4. Name: _____ Relationship: _____ Phone: (____) _____ - _____ Address: _____ City: _____ State: _____ Zip _____ |

Please Initial to Consent/Acknowledge the following:

****Emergency Medical/First Aid***

Initials: _____

- I, parent/guardian of _____, authorize Magnanimous Kids to seek emergency medical care for my child. Care may include transportation to and from the hospital, medical care from a licensed physician in the event that a parent/guardian cannot be reached; in addition, a certified Staff member @ Magnanimous Kids has my permission to provide First Aid treatment for my child. While it is understood that reasonable precautions will be taken to prevent accident/injury to my child while in attendance at Magnanimous Kids, I will not hold them legally responsible for such an accident or injury.

****Physical Activity***

Initials: _____

- I, parent/guardian grant permission for my child _____ to participate in any and all Explorations classes offered through Magnanimous Kids EXPLORATORY Learning Center- physical activities indoor/outdoor at appropriate times; including the use of playground equipment and other toys that are used on a regular basis. I recognize the center will be participating in recreational activities, ex. Athletics, sporting, exercise (aerobics), dance programs-age appropriate, planting in garden and interaction with other students and authorized adults, relay races, rope activities, blow-up bounce houses, large slides, ball activities friendly and age appropriate and parties/celebrations.
**** There will be NO Swimming/Wading Pools on Premises **** I will not hold the Center/Teachers/Caregivers responsible for injuries incurred while using the equipment at the center providing the children are supervised and the equipment is in good repair. Children are encouraged to be physically active indoors and outdoors at appropriate times. Media Screening/Viewing and computers are not permitted for children ages 2 yrs. and under)

Photo/Publicity-Daycare Website

Initials: _____

I hereby give permission and authorization to Magnanimous Kids to take pictures and/or videos of my child while in school or while engaging in learning center activities in which my child may appear for arts & crafts. I am aware that these photos/videos may be used for Magnanimous Kids' website(s), Facebook page and blog to be used in conjunction with promotion and advertising.

****Discipline Acknowledgement***

Initials: _____

- Here at Magnanimous Kids CORPORAL PUNISHMENT IS PROHIBITED AND SHALL NEVER BE USED, regardless of verbal/written authorization from parent(s)/guardian(s). Absolutely No SPANKING, SLAPPING, PINCHING, SHAKING, BITING, JERKING OR POPPING HANDS under any circumstances are allowed on the Center's Premises at any time or by anyone.

****Administering of Medication***

Initials: _____

- If Medically Necessary ONLY medicine prescribed by the child's Practitioner will be ADMINISTERED. Medicines must be labeled with the child's name, exact dosage requirements and times.

- Parents must complete a consent form with all the relevant details. Medicines will always be given by the Center's Director and/or Assistant Director.

The Director will ensure that this record is kept up to date. All medicines will be kept away from the children and stored safely and appropriately. All **medication** should be transported to the learning center by an adult and handed to another adult. **ABSOLUTELY NO MEDICINE OR CREAMS, LOTIONS IN BACKPACKS!!!**

Once the medication is no longer needed or has run out the bottle or container will be returned to the parent.

Non-prescription SEALED medication ex. pain and fever relief medication may be administered, but only with the prior written consent of the parent and only when there is a health reason to do so.

******In the event the wrong medication is provided – Parents will be contacted immediately and will monitor the child for any adverse effects. DSS will also be contacted.

**SC Code of Laws (Section 20-7-723) Insurance Parental Notice:*

Initials: _____

- Release: In consideration of the benefits of participation in the activities conducted and offered at Magnanimous Kids EXPLORATORY Learning Center, I, _____, individually and as parent and/or guardian of _____, the minor child identified above hereby acknowledge the following notices and grant to Magnanimous Kids EXPLORATORY Learning Center the following release from liability: I acknowledge and fully understand that my child will be engaging in physical activities inside/outside the facility grounds that may involve some risk of injury and hereby release, hold harmless and agrees to indemnify/discharge the above referenced preschool, teachers, directors, owners of the property-up to and including leasing agents/landlords and affiliates from any and all liability, claims, demands, actions and causes of action whatsoever, including reasonable attorney fees, arising out of or related to any loss, damage or injury (whether direct, indirect, consequential or otherwise), including death, that my/our minor child and/or I/we might sustain or that any of my/our minor child's and/or my/our property might sustain while participating in any Pick up/Drop off Services at the Center's location. According to the written code above Magnanimous Kids EXPLORATORY Learning Center must inform Parent's that we will not be purchasing any additional liability insurance besides what is insured on the building. When insurance will become effective for this facility parents will be notified.

Computer/Technology Lab Uses & Responsibility

Initials: _____

Technology plays a positive role in children's development and learning. The use of computers and other digital technologies continues to arise in early learning programs, and technology is being used as a tool for improving program quality in many interesting ways. Magnanimous Kids has supported the integration of computers into the early childhood classroom and curriculum since 2007 bringing kids' steps closer to technological awareness.

We have designed a unique technological environment that offers a head start in early childhood and continued elementary education. Through subscriptions, developmentally appropriate software and educational websites we are equipped to provide our children with a much more enhanced interactive learning experience. Every child will have an opportunity to experience ample hands on experiences with different software programs. Once each child has had this hands-on experience, the computer center becomes one of many equally important learning centers. These centers will encourage children to work together and encourage the more advanced students to act as peer tutors. Peer to Peer learning optimizes student learning outcomes and provides a value-added quality that builds cooperative learning environments.

Magnanimous Kids Tech-KNOWLEDGE-y lab will be part of the Learning Landscape of the future. Please initial above if you agree and would like your child to participate in our Technology Lab.

There is an additional Computer Lab Fee: \$25-this fee is not included nor part of the yearly supply fee. Please Initial agreement of fee. **Initials:** _____

Policy Handbook Contract Acknowledgment:

*It is the Parent's responsibility to read the
Online/Offline*

*Policy Handbook @ www.magnanimouskids.com completely before signing and it's the parent's responsibility
to*

Abide by all the policies stipulated in the Handbook.

Parent/Guardian Signature(s): _____ Date: ____/____/____

Parent/Guardian Signature(s): _____ Date: ____/____/____

Annual Policy Update (20__)

Initials: _____

- ❖ I the policies Acknowledge the ALL Policies Procedures in Magnanimous Kids EXPLORATORY Learning Center Parent Handbook & Signed Registration Application on File.

Annual Policy Update (20__)

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Social/Emotional Development Questionnaire

What language is spoken at home? _____

What characteristics in your child's development would you like.....

Encouraged? _____

Discouraged? _____

Please provide any additional information relating to your child that would be helpful in understanding and caring for your child: _____

What are your expectations from Magnanimous Kids Learning Center? _____



Magnanimous Kids **EXPLORATORY** Learning Center, LLC Financial Agreement Contract

Non-Refundable Registration Fee

This fee is required for each child and will ensure placement on our waiting list. This fee does not guarantee future enrollment.

I (the parent) have paid a **NON-REFUNDABLE REGISTRATION FEE** of \$ _____
 One child (**\$100**) and to each sibling (\$75)

I (the parent) have will agree to pay a yearly **NON-REFUNDABLE SUPPLY FEE (\$65)** Initial: _____

Tuition payments must be received on payment schedule date. If tuition due date falls on a Holiday, fees are due on/before the next business day. All outstanding accounts are subject to court and collections. Parents/Guardian are responsible for all court costs. Payments are due prior to services provided for the week/day.

Daycare/Preschool –Kinder –Readiness Tuition (Initial in tuition box)

- **ELA/Pre-K 2 ½-3 yrs. & Kinder-Readiness: Tuition \$209 Weekly (Not/Partially Toilet Trained-at discretion of Center)**
- **ELA (Early Learning Advantage) Pre-K3-4 ½yrs: Tuition \$190 Weekly**
- **Kinder-Readiness 4½ yrs.-5yrs: Tuition \$180 Weekly**
- **After School Tutoring Program: \$105 Weekly**
- **Daily-drop-in rate: \$45 (based on availability for the day). Call in advance.**

Daily & Weekend Tutoring Sessions

- **Skills Reinforcement -S.O. S Reading and/Math Intervention - \$30 per 1.5 hrs. sessions.**
- **Run the Race -Accelerated Reading and/Math Enrichment Program – \$30 per 1.5 hr. sessions**
- **Private Tutoring (Mon.-Friday)- \$35 per 1.5 hr. sessions**
- **Material Fees (Tutoring-Yearly) -\$35**
- **Registration (Tutoring)- \$40**

Please Note: All Sessions are based on Availability.

Please initial the mode of fee payment you have decided on:

I prefer to pay a monthly tuition.

I prefer to pay bi-weekly tuition.

I prefer to pay a weekly tuition.

Make checks payable to **Magnanimous Kids**
Note payments are **non-refundable**—advance payments are credited to accounts)

Additional Agreement Notes:

I (the parent) hereby acknowledge that I (the Parent) am aware of the conditions stated in the Magnanimous Kids EXPLORATORY Learning Center, LLC Financial Agreement, and agree to abide by the above requirements.

Parent full name (print) _____ (Sign) _____

Parent full name (print) _____ (Sign) _____