

Your community partner in Early Childhood Education

908 Centerville Turnpike, S.
Chesapeake, Virginia 23322
(757) 482-4466

2011-2012

Dear Parents:

On behalf of the PreSchool teachers and ministerial staff of Centerville Baptist Church, I welcome your interest in our weekday pre-school program. We seek to provide a quality early childhood education program in a happy, warm and nurturing Christian environment that encourages growth and discovery. These values are reflected by our philosophy:

“We believe a child is one of the most precious gifts that God entrusts to us. The purpose of our ministry is to provide a warm and caring Christian environment that will nourish personal and spiritual growth and encourage discovery. Through the use of learning centers and our kindergarten readiness curriculum, our pre-school presents a balanced, semi-structured, age and developmentally appropriate learning environment.

Through their association with the teachers, pastor and church staff, all of whom strive to be dedicated Christian influences, each child is encouraged to grow in love and appreciation of God, His creation and His Son Jesus.

Centerville Baptist supports parents as the most significant adults in the lives of their children. Parents and teachers, in partnership, become instrumental in the physical, social-emotional, intellectual and spiritual development of the individual child.”

CBC Weekday Children's Programs admit students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions, tuition assistance and other school-administered program

Together, we will make this year one of joy and discovery. Our classes are limited to a specific number of students. To ensure your child's enrollment, the following registration requirements must be completed and returned before enrollment is complete: (1) Completed application form (2) Signed Parent-Program Contract (3) Financial documents (4) Non-refundable fees.

I look forward to hearing from you soon.

Sincerely,

Cathy Curling

A Quick Glance . . .

We understand that children come from diverse backgrounds and cultures, with different personalities, temperaments, abilities and experiences. Our staff, likewise have diverse teaching styles and educational theories and backgrounds. Thus we are better to match the needs of the child with a teaching style that best suits the child.

Biblical principles and stories provide a foundation for our pre-school day. Theme oriented lesson plans and learning centers provide avenues for our teachers to explore these principles and provide age appropriate guidance. Music and art projects also help reinforce math concepts and reading readiness skills.

Social development is another aspect of kindergarten readiness. Children learn the rules of acceptable behavior, cooperation and compromise while at play. Structured and unstructured activities in the classroom and on the playground provide opportunities for conflict resolution, problem solving and encourage pro-social behavior.

A Closer Look . . .

History

Centerville Baptist has a long history in the community. The church was founded in 1872. The old sanctuary structure dates back to 1925. Our weekday pre-school is among the oldest in the area and was established in 1957.

As a ministry of the church, we are exempted from licensure by the Commonwealth of Virginia's Department of Social Services. We annually submit documentation to retain our exempt status. Our compliance with the Code of Virginia is detailed in our Parent/Student Handbook.

Staff

All pre-school staff members have either prior experience in Early Childhood Education, degrees in related fields or are currently engaged in an on-going educational program. Teachers and assistants have been certified to be free of any disabilities which would prohibit care or supervision of children entrusted into our care, by a practicing physician, as required by the Code of Virginia. All of our staff members have received a Criminal History Records Clearance and Search of the Central Registry from Child Protective Services prior to employment. Staff members participate in workshops throughout the school year to update skills and review requirements of the Commonwealth of Virginia.

Parent/Teacher Partnership

The pre-school experience is a partnership between parents and teachers. Parents provide the foundation of skills the child will need for a successful pre-school experience through activities first taught in the home. Teachers will work diligently with the children to help them develop their ever increasing skills. With this understanding, a list of age and developmentally appropriate skills and/or activities will accompany this package. These skills need to be practiced both at home and in school until the child achieves mastery.

Registration and Tuition

CBC Pre-School registration/facilities fees cover some of our administrative costs as well as the costs of insurance premiums, facilities supplies, etc. Curriculum fees cover the costs of workbooks, art and craft supplies, worksheets, and general classroom supplies. Curriculum fees and registration/facilities fees are charged annually and are non-refundable.

Our budget is based upon the annual tuition of every child. Tuition is quoted and payable for the entire year, September through May. Monthly payments are available with a 0% interest rate. Parents or guardians are issued a Federal Truth in Lending Disclosure Statement detailing the cost structure of the selected program.

Financial Agreements and Parent/Program Agreements are issued to the party responsible for the payment of the annual tuition. Penalties for withdrawal of a child from the program are the responsibility of the parents or guardians and are detailed in the Parent/Program Agreement and Financial documents.

Age Based Classes

CBC Pre-School offers classes for children between the ages of 2 1/2 and 5 years old. We are in compliance with the Commonwealth of Virginia regarding the date of birth standard of September 30th. Children are eligible for age based classes based upon this standard. In the best interest of the child, children must meet the age standard to qualify for a preschool or kindergarten class.

Student to Adult Ratios

Age-based classes have a limited number of students per classroom. The student to adult ratio as mandated by the Commonwealth of Virginia is 10 to 1. We strive for lower ratios in our classrooms.

2 1/2 years old	6 students	1 adult
3 years old	8 students	1 adult
4 years old	8 students	1 adult
5 years old	10 students	1 adult

Thematic Curriculum

The traditional pre-school curriculum is based upon a thematic approach to learning. Using the Virginia Foundation Blocks and kindergarten academic expectations (Standards of Learning/ Chesapeake pacing guide for Kindergarten) as a guideline, our teachers use age and developmentally appropriate learning activities, art and music to allow children to construct a world of learning in a fun and exciting environment. Teachers create thematic lessons that present children with the opportunities to learn through games and hands-on activities that reinforce academic, fine motor and gross motor skills. More advanced skills such as patterning, sequencing, graphing, visual and auditory discrimination (letter and phonemic recognition) and the ability to apply knowledge to new information are typical in the thematic classroom. Biblical truths are woven into the curriculum.

Thematic curriculums focus on the basic skills children need to prepare for kindergarten, such as social skills, developing fine and gross motor skills, the ability to listen and comprehend, ability to stay on task and to complete the task at hand.

By using theme units as the basis for learning, children are presented with opportunities to explore, ask questions, and discover more about the world they live in.

Hours of Operation

The school day begins promptly at 9:00 a.m. Children may be escorted into the building from 8:50 a.m. until 9:00 a.m. We cannot admit children into the classrooms before 8:50 a.m. Adult escorts may accompany children into the building and to the classrooms during this time. The classroom teachers will receive the children and will be available for brief communications. You are asked to help us respect the schedule of the classroom teacher by leaving as quickly as possible.

The pre-school day concludes at 11:45 and car pool ends at noon; Kindergarten at 1:00 p.m.. You may enter the building and proceed to your child's class from 11:45 until 11:55 a.m. for early release.

Security Precautions

Every adult that enters the facility and enters the classroom hallway is required to sign-in on the daily log sheets located in the foyer. Parents/caregivers may accompany the child into the classroom, but should allow the child to take responsibility for his/her personal possessions.

Breakfast Club

We offer an early drop off option. This allows you to bring your child in beginning at 8:00 a.m. This is available through our Parents Morning Out program. This is available daily at the drop-in rate of \$8.00 per child, per day and \$4.00 per child, per day advance reservations.

Lunch Bunch

The pre-school offers a one hour "Lunch Bunch" option until 1:00 p.m., for the times when you require a little more time to complete tasks. Reservations are required. This is available daily, at the drop-in rate of \$8.00 per child and \$4.00 per day, per child with advanced reservations. Parents are responsible for providing a lunch and beverage for the child.

Stay-and-Play

Stay-and-Play is available two days per week until 2:30 p.m. through our Parents Morning Out program. PMO children and Preschool students are eligible to participate. Additional fees apply.

Enrollment Requirements

Health Screening/School Physical

Parents/guardians of children entering the program are required to submit a school physical report. This will include a record of the child's immunization history. School physical report forms are included in your enrollment package.

Proof of Identity/Proof of Date of Birth

The Commonwealth of Virginia's Code of Virginia requires parents/guardians to present proof of the applicant's date of birth. We are required to view and record information from the child's certified birth certificate, Social Security card or passport. Failure to provide the documentation later than the first full week of school must be reported to the local law enforcement agency.

Legal Authorization

To protect the welfare, health and safety of the students, staff, church and parent volunteers, Centerville Baptist Church Pre-School requires notarized legal authorization for the transport of a child. This authorization includes transportation by emergency medical personnel, church staff, contracted private coach or parent volunteer. Transportation will not be provide if authorization is not provided.

A "Legal Authorization" form is included in this enrollment package and must be signed in the presence of a "Notary." Please do not sign the form until the notary instructs you to do so. Forms that are returned with a parent signature, without the accompanying signature of a notary are invalid and will not be accepted.

Transportation Providers

Parents/guardians are required to register the names of individuals authorized to transport children. Parents/guardians electing to waive legal authorization for transportation are solely responsible for field trip transportation. Children may be transported on field trips via contracted coach, the church owned 15-passenger vans or by parent volunteers in their privately owned vehicles.

Children younger than eight (8) years of age must be transported in an approved child restraint device or safety seat. Parents/guardians are responsible for installing seats in vehicles used for field trip transportation.

School Year 2011-2012 Enrollment forms must be completed annually

Please check the appropriate boxes.

- 2 day 2—2 1/2 2 day 3 3 day 3
 3 day 4 5 day 4 Kindergarten PMO
 Extended Care/Combo

How did you learn about our programs Internet/Website: _____
 Personal Referral (Who should we thank: _____)

INFORMATION REQUESTED IS REQUIRED AND NECESSARY. PLEASE COMPLETE ENTIRELY.

Child's full name: _____ Telephone Number: _____
To what name does your child answer? _____ Gender: M F
Age (09/30/10) _____ Date of birth: ___/___/___ Full-term Premature ___ weeks Adopted
Child's complete address: _____ Family Email Address: _____
@ _____ Name of Subdivision: (if applicable) _____

Office Use Only

Identity Verification

The Commonwealth of Virginia requires parents/guardians to provide proof of a child's age and identity. Proof of the child's identity and age may include an original or certified copy of the child's birth certificate, passport, copy of placement agreement from a child placing agency, or a records from a public school, i.e., certified by a principal of a public school in the United States. Failure to provide the proper documentation must be reported to local law enforcement agencies according to statute.

Place of birth: _____ DOB: ___/___/___ Date of Issue: ___/___/___
Birth Certificate Number: _____ Birth Certificate Social Security Card
 Other Adoption Records Date Viewed: ___/___/___

Parent/Family Information:

- Married, living together Separated Divorced Single Parent Unmarried, living together

Non-Family of Origin: Guardian(s) Grandparent(s) Other: _____

(If child does not reside with both parents, please attach a description of the custody agreement)

If you are a stay-at-home parent, please list your career profession in the "Occupation" category

Information MUST be provided in full

Father/Guardian's Information:

Name: _____
Occupation/Profession: _____
Employer: _____
Work address: _____
E-Mail address: _____
Telephone numbers:
Business: _____
Cellular: _____
 Same home information as child

Mother/Guardian's Information:

Name: _____
Occupation/Profession: _____
Employer: _____
Work address: _____
E-Mail address: _____
Telephone numbers:
Business: _____
Cellular: _____
 Same home information as child

If child resides with an adult other than parent, (i.e., step-parent, parent's partner, etc.) please provide information:

Name: _____
Occupation/Profession: _____
Work address: _____
Work phone number: _____

What does child call adult? _____
Employer: _____
E-Mail address: _____
Cellular phone number: _____

Please list the names, ages and genders of siblings (both at home and away) _____

Previous child care/preschools attended:

The Code of Virginia requires parents/guardians to disclose the names, locations and terms of previous enrollment:

Name: _____ Term of enrollment: _____
Location: _____

Transportation Providers:

Please register the names and phone numbers of individuals authorized to provide transportation for your child.

(1) _____ (2) _____
(3) _____ (4) _____

Emergency Transportation Provider

Please list the names and telephone numbers of two individuals authorized to pick up your child in the event of emergency, sudden on-set illness, etc., when you will not be home and able to pick up your child within thirty (30) minutes.

(1) _____
(2) _____

Person (s) **NOT** authorized to pick up your child: *(Appropriate custody papers must be provided to the church if a parent is NOT allowed to pick up a child from our facility.)*

Name: _____ Relationship to child: _____

Self-Help Skills

- Yes No Does your child demonstrate control over bladder functions?
- Yes No Does your child demonstrate control over bowel functions?
- Yes No Does your child require assistance with toileting functions (clothing issues, cleaning, flushing, etc.?)
- Yes No Proper hand washing?
- Yes No Does your child require assistance blowing his/her nose?
- Yes No Does your child require assistance with snack and juice containers?

Medical History:

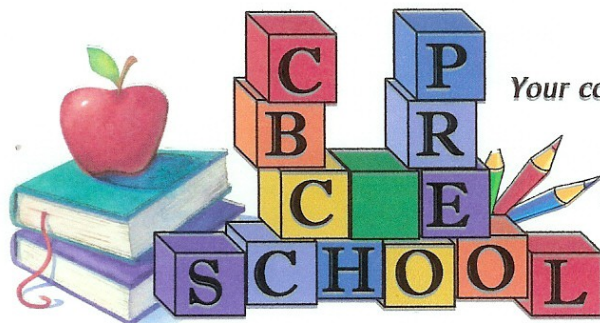
- Yes No Health Insurance
- Yes No Regular routine physical examination within the past six months
Date of last exam: _____
- Yes No Regular routine dentalexamination within the past six months
Date of last exam: _____
- Yes No Immunizations per CDC guidelines
- Yes No Visual examination: No Impairment Yes _____
- Yes No Speech evaluation No Impairment Yes _____
- Yes No Developmental assessment: No Yes _____
 Physical/orthopedic Emotional Behavioral Other _____

Yes No Allergies : _____
How are allergies manifested? _____
 Yes No Routine medications: _____

Name and telephone number of child's primary physician: _____

Name and telephone number of child's dentist: _____

If your child has experienced any serious illnesses, injuries, hospitalizations, minor/major surgery, please provide the approximate dates, nature of the event and name of the physician: _____



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Pre-School Policies and Activities

Parent(s) Name(s): _____
Child's Name: _____ Age: _____ DOB: _____

The Pre-School will provide an appropriate early educational weekday program for the term of days weekly, as specified by the parents or guardians, from September through May.

Parents/guardians may utilize “Lunch Bunch,” “Breakfast Club,” or “Stay and Play” extended day options for additional fees, separate from tuition payment.

Children displaying signs or symptoms of illness, as described in the official “Parent-Student Handbook,” will not be admitted until free of symptoms for 24 hours. _____ (Initial)

In case of accident or illness of the child, the staff will promptly take reasonable measures as are, in her/his best judgment, in the best interest of the child, and will notify parents as soon as possible.

The school will provide physical, social-emotional, cognitive and spiritual development in a group situation.

The school will provide limited liability accident insurance coverage.

The school will not release the child to anyone other than the authorized transportation providers as registered by the parents or guardians.

The school will provide resources in sufficient quantity to allow for a variety of play and learning activities during the day.

The program stipulates that children displaying signs or symptoms of developmental delays which cannot be incorporated into the classroom environment or unacceptable behaviors that injure or harm other students or staff, the director or pastor reserves the right to dismiss a child from the program for cause. _____ (Initial)

The parents or guardians agree that:

The responsible party will pay the non-refundable registration and curriculum fees at the time of enrollment, as indicated on the Financial Disclosure Document.

The responsible party will pay the child's tuition 2 weeks prior to the 1st of the month the advance the sum of:

- \$160.00—2 1/2 year old \$155.00—2 day 3 year old 186.00—3 day 3 year old
 \$186.00—3 day 4 year old \$223.00—5 day 4 year old \$295.00—Kindergarten

A late charge of \$25.00 will be applied after the first of the month. Additionally, educational instruction will be discontinued until payment of tuition and late fees are paid in full. _____ (Initial)

Additional charges are levied for periods of tardiness in departure time will be due and payable daily. Responsibility for payment on time is that of the parent/guardian or their designated party listed on the Financial Agreement Form. If the responsible party sees that the tuition cannot be paid on time, he/she must make arrangements for the delayed payment with the Financial Secretary before the payment is due. If acceptable arrangements for payment have not been made upon payment due date, plus a two week grace period, instruction will be discontinued until such time as payment has been rendered. _____ (Initial)

Tax statements are issued once annually, during the month of January. Monthly account statements are issued at the beginning of each month and reflect payments for tuition, fees, and miscellaneous charges. _____ (Initial)

In the event that a child is withdrawn from the program, for reasons other than military family transfer, the annual tuition is payable by the responsible party until another child is enrolled to fill the vacancy. _____ (Initial)

If the child needs a prescribed medication during the day, the school must receive a statement from the prescribing physician regarding the manner in which the medication is to be administered as well as acknowledgement that the child is able for function "normally" in the group situation. _____ (Initial)

In the case of illness or accident, the parents/guardians have submitted a notarized Emergency Medical Release authorizing appropriate medical attention and transportation. In all emergencies, the program has permission to take such reasonable measures as are, in the judgment of the Pastor, Director or teacher necessary for the welfare and safety of the child. _____ (Initial)

In the event of contagious illness, the parents/guardians will notify the school. The child will not be allowed to return to school until all danger of the contagion is gone. _____ (Initial)

The school reserves the privilege of dismissing any child, if he/she seems unable to participate in group activities due to developmental delays, physical disabilities or behavioral issues. _____ (Initial)

Liability for a child's actions, while in the care of the program, lies solely with the parents/guardians. _____ (Initial)

The parent/guardian will give two weeks notice when a child is to be withdrawn. Parents/guardians/parties responsible for payment will be required to pay-in-full the balance of the annual tuition, if the vacancy created by the child's departure is not immediately filled. _____ (Initial)

Centerville Baptist Church Pre-School and parents/guardians understand and agree that this agreement is a contract binding for both operator and parents/guardians.

(Signature of parent/guardian/responsible party)

(Authorized signature for CBC Pre-School)

(Date)

**FEDERAL TRUTH IN LENDING DISCLOSURE STATEMENT
FOR SERVICES RENDERED**

The Federal Truth in Lending Act, Regulation Z
REQUIRES a Federal Truth in Lending Statement
If there are more than four (4) payments

Child's Name: _____ Date: _____
 Name of Party Responsible for Payment: _____
 Address: _____
 Telephone Number: _____ E-Mail address: _____

Educational Services

Total Annual Tuition:	<input type="checkbox"/> 2 day 2—2 1/2 year old class	<input type="checkbox"/> \$1,440.00/\$160.00 mo.
	<input type="checkbox"/> 2 day 3 year old class	<input type="checkbox"/> \$1,395.00/\$155.00 mo.
	<input type="checkbox"/> 3 day 3 year old class	<input type="checkbox"/> \$1,674.00/\$186.00 mo.
	<input type="checkbox"/> 3 day 4 year old class	<input type="checkbox"/> \$1,674.00/\$186.00 mo.
	<input type="checkbox"/> 5 day 4 class	<input type="checkbox"/> \$2,007.00/\$223.00 mo.
	<input type="checkbox"/> K-5 class	<input type="checkbox"/> \$2,655.00/\$295.00 mo.

Registration and Facility Fee:	<input type="checkbox"/> \$160.00 (2-day Classes)*	* <input type="checkbox"/> \$185.00 (2-day Classes)
* Current In-House Families	<input type="checkbox"/> \$170.00 (3-day Classes)*	* <input type="checkbox"/> \$195.00 (3-day Classes)
* General Public	<input type="checkbox"/> \$185.00 (5-day Classes)*	* <input type="checkbox"/> \$210.00 (5-day Classes)

Curriculum Fee	<input type="checkbox"/> \$ 35.00 (2-day 3-Year old Thematic classes)
	<input type="checkbox"/> \$ 50.00 (3-day 3-Year old Thematic classes)
	<input type="checkbox"/> \$ 75.00 (3-day 4 Year Old classes)
	<input type="checkbox"/> \$115.00 (5-day 4 year old class)
	<input type="checkbox"/> \$150.00 (Kindergarten)

Total Fees \$ _____ Payment Received with Enrollment \$ _____
 Unpaid Balance: \$ _____

The first regularly scheduled monthly payment of the 2011-2012 annual tuition is due August 15th. Each subsequent payment is due and payable two weeks in advance, (the 1st of the month) until paid in full. (Alternative pay date as approved by Pre-School administration: _____).

The schedule of payments is extended over _____ months for the convenience of the party responsible for payment. Monthly payments are available with a 0% interest rate.

For accounts which have become past due, a late fee of \$25.00 will be added to your balance.

In the event that a child is withdrawn from the program, for reasons other than military family transfer, the annual tuition is payable by the responsible party unless the vacancy created by the child's departure is not immediately filled. Late payment fees are applicable. _____ (Initial)

In the event that collection or other legal procedures are instituted, I agree to pay all expenses of collection, including court costs, and reasonable attorney fees, if such is incurred. _____ (Initial)

I HEREBY CERTIFY that I have read and received a copy of this disclosure statement this _____ day of _____, and agree to these terms.

 (Signature of Party Responsible for Payment)

 (Relationship to Student)

Centerville Baptist Church Pre-School
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Financial Arrangements

Centerville Baptist Church has made provision for the payment of our early childhood education program annual tuition to be paid in monthly installments, as outlined in the "Truth in Lending" statement. We have developed the following procedures to manage the financial obligation effectively.

A "Truth in Lending" statement, required by Federal Law, outlines the terms for payment, and must be signed by the party responsible for payment, at the time of enrollment.

A monthly payment schedule is made available with a 0% interest rate.

All payments are due two weeks in advance. If a payment has not been received by the first (1st) of the month, an "Overdue Account Statement" will be issued to the party responsible for payment. All payments issued after the 1st of the month are subject to a \$25.00 late charge per month.

If the responsible party determines that the tuition cannot be paid on time, he/she is responsible for making the necessary arrangements with the Financial Secretary to make the account current. If acceptable arrangements for payment have not been made upon the tuition payment due date, inclusion in the program will be discontinued until such time as the payments are made current. Payment of tuition for the balance of the year is due and payable in accordance with our policies. _____
(Initial)

Acceptable arrangements are defined as either payment in full, or an extended payment schedule.

In the event that a child is withdrawn from the program, for reasons other than military family transfer, the annual tuition is payable in full by the responsible party, unless the vacancy created by the child's departure is not immediately filled. _____ (Initial)

If at any time, you feel that our records are in error, or you would like to discuss the status of your account, please contact our Office Manager at 482-4466.

I have read the above information and understand the administrative policies concerning financial arrangements.

(Signature of party responsible for payment)

(Date)

This document must be signed in the presence of a Notary Public



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Legal Authorization Form and Emergency Medical Release 2011—2012

I/we hereby give permission for _____ to participate in events, activities and field trips with Centerville Baptist Church Pre-School for the school year 2011—2012. _____ (Initial)

I/we understand that risks of accidental injury are incidental to the conduct of normal classroom participation, playground activities, activities in the gym, and elective extra-curricular activities. I/we assume all risks and hazards incidental to the conduct of events, activities and normal classroom participation and hereby acknowledge and give our informed consent for participation. _____ (Initial and date)

In the event of injury, sudden illness or other emergency situations that may require evacuation, I/we hereby authorize EMERGENCY transportation for my/our child in the church owned 15-passenger vans, private vehicles owned and operated by CBC Pre-School or church staff, and emergency medical transport personnel. I/we assume all risks and hazards incidental to the emergency transportation and hereby acknowledge and give our informed consent for participation. _____ (Initial and date)

In the event of accident, illness or injury, I/we hereby grant permission to Emergency Medical Personnel, Attending Physicians and hospital personnel to perform whatsoever care is necessary for the welfare of my/our child, until I/we can be in attendance. _____ (Initial and date)

Please attach a copy of your child's health care provider/insurance carrier card.
Please attach a recent photograph of your child.

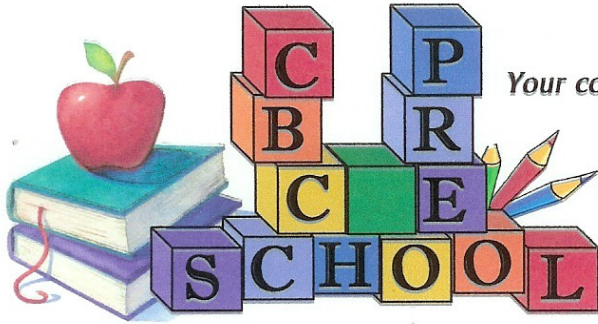
Primary Care Provider: _____ Telephone number: _____

Dentist: _____ Telephone number: _____

Please list any medications, allergies and/or medical information responding medical personnel should know about this child: _____

**DO NOT SIGN THIS DOCUMENT UNTIL YOU ARE IN THE PRESENCE OF A NOTARY.
UN-NOTARIZED FORMS ARE INVALID.**

_____ (Signature of Parent/Guardian)	_____ (Signature of Parent/Guardian)
Daytime telephone numbers: _____	Daytime telephone numbers: _____
State of Virginia, City of _____, to wit: Subscribed and sworn to before me this ____ day of _____, 2____.	
My commission expires _____.	
_____ (Signature of Notary Public)	



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Parent Participation Information

Centerville Baptist Church Pre-School enlists the assistance of our Pre-School parents to help the teacher(s) with seasonal activities and parties. All parents/guardians are expected to participate by either providing items for classroom parties, such as teacher requested foods, drinks, etc, and/or by actually helping organize and orchestrate the activity.

Parents may not solicit money from other parents without the expressed written approval of the Pre-School Director. (Classroom parties, teacher gifts, etc.) _____ (Initials)

- Yes No Classroom Volunteer
 Yes No I would like to be a head room parent
 Yes No I cannot participate in the classroom, but will help provide items for the activities

Field Trips

Your child's teacher may organize a field trip for the class. Parents/guardians or a designated party are responsible for the transportation of the child to and from the location of the field trip and supervision during the trip. _____ (Initials)

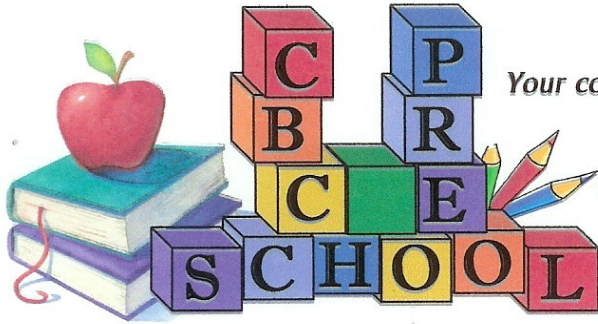
Field trip admissions fee are payable one week prior to the event. Parents will be notified of the date, time, location, costs and other details of the event by flyer or classroom newsletter. Children that will not participate in the field trip should remain at home the morning of the event, as the class will not be in session at our facility. _____ (Initials)

In accordance with the Code of Virginia, vehicles used to transport children must be insured to provide bodily injury liability insurance and property damage liability insurance. Coverage must meet \$100,000/\$300,000 limits as recommended by the state. In compliance with the Code of Virginia, child restraint devices which meet the standards adopted by the U. S. Department of Transportation must be used for all children under the age of six (6) years old.

- Yes No I will drive and transport my child
 Yes No I cannot transport my child, but will have a designated adult attend in my place

Comments: _____

Signature and Date: _____



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Activity Consent

I/we acknowledge that risks of accidental injury are incidental to the conduct of normal classroom participation, playground activities, activities in the gym, and elective extra-curricular activities. Playground equipment pose apparent hazards. Slides, swings, climbers, etc., present opportunities for injury. I/we understand that teachers/ staff members cannot prevent accidents that may occur as a result of normal playground activities. I/we understand that we will be informed of incidents, accidents and injuries that occur under their care. I/we understand that teachers will respond to injuries with appropriate First Aid, including emergency medical intervention if required.

_____ (Initial)

Likewise, teachers will respond to misbehavior or inappropriate playground activities immediately and reserve the option to disallow a child's access to playground equipment as a result of misbehavior. _____ (Initial)

Parent Handbook, page 17, under the heading "Dress Code," our policy states "Each child is expected to wear appropriate protective clothing, adequate for the weather and season. Shoes AND socks are REQUIRED. Sandals, "Crocs," flip, flops, etc., are inappropriate for children's school wear. Shoes should have closed toes and heels and should fit the child properly."

I/we understand the Pre-School policy regarding "acceptable" shoes and socks and understand the Pre-School administration's concerns that inappropriate shoes may contribute to playground injuries. _____ (Initial)

I/we assume all risks and hazards incidental to the conduct of events, activities and normal classroom participation.

Signature and Date: _____

Photography/Videography Acknowledgement

I/we acknowledge that Centerville Baptist Pre-School utilize photography or video-photography for promotional and/or advertising materials, teacher created art or craft activities and school-wide presentations or to document classroom activities. Similarly, administrators may use video for documentation. I affirm that I/we have been informed. _____ (Initials)

Release of Contact Information

I/we give permission for my/our names, telephone numbers and email address to be released for the classroom directory. _____ (Initials)

Child's Name: _____

Parent(s) Signature: _____

Date: _____

