

ENROLLMENT 2023-2024

501 W Main St Ardmore, OK 73401
(580)223-3672



CHILD'S INFORMATION

Name: Birthdate:

Gender ☐ Male ☐ Female Age by August 31, 2023:

IS YOUR CHILD FULLY TOILET TRAINED? ☐ Yes ☐ No

CHILDREN IN OUR 3'S AND PRE-K CLASSROOMS MUST BE FULLY TOILET TRAINED WHEN SCHOOL STARTS.

ANY ALLERGIES/MEDICAL NEEDS?

MAILING ADDRESS:

ENROLLMENT OPTIONS

SCHOOL LUNCH YES ☐ NO ☐

<u>SCHEDULE</u>	<u>HOURS</u>	<u>TUITION</u>	<u>LUNCH CHARGE</u>
<input type="checkbox"/> Monday-Friday	8:30-2:30	\$425/mo	\$75/mo
<input type="checkbox"/> Monday-Thursday	8:30-2:30	\$350/mo	\$65/mo
<input type="checkbox"/> Monday/Wednesday/Friday	8:30-2:30	\$250/mo	\$55/mo
<input type="checkbox"/> Tuesday/Thursday	8:30-2:30	\$175/mo	\$45/mo
<input type="checkbox"/> Before School Care	7:30-8:30	\$25/mo	
<input type="checkbox"/> After School Care	2:30-5:15	\$150/mo	

A \$100 NON-REFUNDABLE ENROLLMENT FEE IS REQUIRED AT ENROLLEMENT
PRE-K STUDENTS (4YRS BY 8/31) MUST ATTEND MONDAY-THURSDAY OR MONDAY-FRIDAY

PARENT INFORMATION

Parent #1 Information

Name:

Mobile Phone: Emergency Contact: Allowed to pick up: ☐

Business Phone: Company Name:

Church Affiliation: Job Title:

☐ Single ☐ Married ☐ Divorced ☐ Widowed

Parent #2 Information

Name:

Mobile Phone: Emergency Contact: Allowed to pick up: ☐

Business Phone: Company Name:

Church Affiliation: Job Title:

☐ Single ☐ Married ☐ Divorced ☐ Widowed

STUDENTS NAME: _____

2023-2024

EMERGENCY CONTACT AND ALTERNATE PICKUP

Name: _____

Mobile Phone: _____ Relation: _____ Allowed to pick up: _____

Name: _____

Mobile Phone: _____ Relation: _____ Allowed to pick up: _____

Name: _____

_____ Relation: _____ Allowed to pick up: _____

PLEASE READ AND SIGN BELOW

TUITION

Bright Beginnings has established the following policy for payment of tuition to help insure the tuition is divided into 10 monthly payments, beginning August 1st through May 1st, with 10 monthly payments. Tuition is not waived during holidays, breaks, inclement weather or closures. Tuition is due on the 1st of each month and is considered late after the 10th. There will be a \$25 charge for late tuition payments (unless previous arrangements have been made with the office). Payments can be made via Brightwheel, check, or money order. We DO NOT accept cash payments. If paying on Brightwheel you will also pay a processing fee from the company. If your check is returned you will be required to pay a \$30 returned check fee. If this happens more than two times you will be required to pay with a money order.

FUNDRAISER

Each year Bright Beginnings at FMC Preschool will have one main fundraising event to help with the cost of purchasing new equipment, supporting our teachers, and our classrooms. Each family will be responsible for collecting a minimum of \$50 in funds. Each additional sibling is responsible for an additional \$25.

PHOTO RELEASE

I give permission for any videotapes, photographs, and/or comments or quotes from interviews to be used by First Methodist Church, its assigns or successors to promote children's ministry. Furthermore, I hereby consent that such photographs, films and comments shall be property of FMC, and they shall have the right to use as they may desire for publicity purposes, free and clear of any claim whatsoever on my part. Children's names will not be associated with photographs on our website, or social media.

TO RECEIVE EMERGENCY MEDICAL CARE

I give permission for the Director or person in charge to take whatever steps are necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to, the following:

1. Attempt is made to contact a parent or guardian.
2. Attempt to contact parent through anyone listed on the child's emergency card.
3. If we cannot contact the parent or an emergency contact we will do any or all of the following:
4. Have the child taken to the emergency room of the local hospital in the company of a staff member and/or call an ambulance.

Any expense incurred under item number 4 above will be the child's family responsibility. Bright Beginnings will not be responsible for anything that may happen as a result of false information given at the time of enrollment.

LUNCH FEES

Lunch fees are based off of an average number of days each month. There will be no daily charge. If you unexpectedly need us to provide lunch for your child you will be charge the monthly fee based on the number of days your child is enrolled.

I _____ agree to the policies listed above.
(Parents Signature)



**Insurance Notification:
Child Care Programs and Family Child Care Homes**



Program Information

First	Methodist Church Preschool		K830020446
Program name			License number
501 W. Main Street	Ardmore	OK	73401
Street address	City	State	ZIP code
501 W. Main St., Ardmore, OK 73401			
Mailing address			
580-223-3672	David Daniel, Pastor		
Phone	Owner		

Child Information

Please list the name(s) and birth date(s) for any child(ren) you are enrolling in this program:

Name	Date of birth

Agreement and Signature

- I understand and am aware this program:
 - ☐ does not maintain general liability insurance coverage, as defined by Section 707 of Title 36 of the Oklahoma Statutes, of at least two-hundred-thousand dollars (\$200,000) for each occurrence of negligence. This insurance would cover injury to a child due to negligence that occurs while the child is in the care of the child care program.
 - ☒ reports self-insurance in accordance with state law.
 - ☐ is required to post **Form 07LC093E, Insurance Exception Notification** in a conspicuous location.
 - ☐ Select for a copy of **Form 07LC093E, Insurance Exception Notification** which is to be provided to parents upon enrollment or when information changes.
- This form is to be completed:
 - ☒ upon child enrollment; and
 - ☒ every 12 months thereafter.

Parent or legal guardian name	Parent or legal guardian signature	Date
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Compliance File Notification:
Child Care Programs and Family Child Care Homes



Program Information

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Program name			License number	
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Street address	City	State	ZIP code	
501 W. Main St., Ardmore, OK 73401				
Mailing address				
580-223-3672	David Daniel, Pastor			
Phone	Owner			

Child Information

Please list the name(s) and birth date(s) for any child(ren) you are enrolling in this program:

Name	Date of birth

Agreement and Signature

- I understand and am aware:

- ☒ this program is required to maintain a copy of the compliance file on-site and the information contained in the file is available for inspection.
- ☒ of the Compliance File location and its contents.
- ☒ this form is to be completed:
 - ☒ upon child enrollment; and
 - ☒ every 12 months thereafter.
- ☒ a copy of the program specific **Notice to Parents** is to be provided to parent(s) or legal guardian(s) upon enrollment.

For program specific information contained in the Notice to Parents, select one:

- ☒ DHS Publication No. 14-01, Notice to Parents for Child Care Program
- ☐ Form 07LC084E, Notice to Parents for Family Child Care Home

Parent or legal guardian name	Parent or legal guardian signature	Date
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This document does not meet posting requirements per OAC 340:110-3-275 through 340:110-3-311, and DHS Pub 14-15 Licensing Requirements for Child Care Programs, and is a parent provided document only. Information contained in DHS Pub 14-01 Notice to Parents is stated below. You may obtain a copy of DHS Pub 14-01 by calling 1-877-283-4113, or by faxing (405) 962-1741.

NOTICE TO PARENTS

Please review the following records on a regular basis at child care centers, day-camps, drop-in programs, out-of-school time programs, part-day programs, and programs for sick children.

Posted: The program is required to post:

- This Notice to Parents; and
- Child Welfare Investigative Summary, with confirmed and substantiated findings for 120 calendar days from the date the investigation is completed as indicated on the form.

Compliance file: The program is required to make accessible in a prominent location the following documents, maintained together, with the most recent on top and all child-identifying information removed. The compliance file includes items within the last 120 calendar days, at a minimum, from the date on the document or the investigation completion date on the form, unless requirements state otherwise.

The compliance file **only** contains: compliance monitoring from Licensing, Stars and tribal agencies, such as: **monitoring visit forms**; including the most recent visit; **case status information**; such as forms and correspondence regarding: issuance of permits and licenses; non-compliances and Stars violations; notices to comply; complaint findings; office conferences with Licensing, Stars and tribal agencies; Stars alternative settlements and reductions; consent agreements, denials of a request for license, and revocations of a license; child welfare investigative summary, regardless of findings; however, confirmed or substantiated findings are maintained in the file for 12 months; granted criminal history restriction waiver notifications are maintained in the file for as long as the individual is employed or is living in the facility; and other documents indicating placement in the compliance file.

Online

Child care locator and case summary: Access at the below Web address.

Licensing requirements for child care programs: Access at the below Web address or contact the local DHS office below for a mailed copy.

At the DHS local office

Public licensing file: Contact the local office below to schedule an appointment.

Case summary: Contact the local office below for a faxed or mailed copy.

If you believe licensing requirements are not being met or you have questions, please contact a child care licensing specialist from DHS Child Care Services at:

DHS local office

Child Care Services

Address: 410 Travertine, Ardmore OK 73401 **Phone:** 580-490-3600

<http://www.okdhs.org/services/cc/Pages/ChildCareMain.aspx>