



Dear Parents,

Thank you for your interest in Premier Preschools. We know how important your childcare decision is and are proud to be able to offer families a childcare program that includes the benefits you have come to expect from your childcare provider plus a solid educational foundation your child can build upon. At Premier Preschools, we are committed to providing your child with a strong educational foundation through our developmentally appropriate programs in a warm, nurturing and secure environment.

All campuses are designed with safety and security in mind. Our security doors restrict access to our classrooms to only those persons with children enrolled. Our closed-circuit video cameras ensure all areas of campus are visible from the front office.

Our classrooms are child-centered and designed to stimulate creative exploration and support discovery through meaningful real-life experiences. Our methods are built on experience and sound educational philosophies.

Premier Preschools have a team of experienced, professional early childhood educators. Their true love of children is vital to the successful program we offer. Ongoing educational opportunities are provided to keep them up-to-date on the latest research and techniques. All staff members are certified in CPR and First Aid. Our low teacher/student ratio encourages participation and enables teachers to get to know each child individually.

Education is a shared responsibility. At Premier Preschools, we make an extraordinary effort to keep parents informed of their child's progress and development, as well as day-to-day classroom activities. Parent involvement is encouraged and expected. Diversity in all families is valued and celebrated.

Our child-centered curriculum and classroom environment, along with our dedicated parents and educators, grant us the ability to enhance your child's social, emotional, and cognitive growth. Parents have peace of mind knowing their children are cared for by dedicated, caring teachers on a secure campus. We would love the opportunity to give you a tour of our campus and talk with you about how we can meet your childcare needs.

Sincerely,

Cyndie Allen
Owner/Director

Math skills develop through:

- Building with blocks
- Sorting and categorizing
- Measuring and pouring
- Identifying shapes, sizes, patterns, and sequences
- Identifying numbers, symbols and quantities
- Counting and comparing
- Graphing

Science concepts develop through:

- Observing nature and seasonal changes
- Observing plant and animal life
- Engaging in discovery of physics through experimentation with the environment

Social studies concepts are introduced through:

- Learning about ourselves and our families
- Learning about a variety of cultures and customs
- Exploring holidays around the world
- Role-playing about occupations and families
- Learning about people with disabilities
- Exploring our world and community with visitors and field trips

Art and Creative Representation is developed through:

- Placing an emphasis on the process and not the product
- Drawing and coloring with crayons, pencils, markers and chalk
- Cutting and gluing
- Painting with brushes and a variety of natural objects
- Creating with a multitude of materials, including feathers, beads, pictures, fabric, etc.

Motor Skills (large and small) are developed through:

- Playing outside with tricycles, balls, wagons, etc.
- Learning to repeat movement directions
- Moving to music
- Manipulating small objects
- Cutting with scissors
- Jumping and running
- Climbing on equipment

8 weeks through 30 months

Development Through Key Experiences:

Language is developed through:

- Listening and responding to others
- Listening to music
- Exploring books
- Associating words with objects
- Participating with give-and-take communication

Math concepts developed through:

- Sorting and categorizing
- Stacking and nesting
- Filling and dumping
- Enclosing oneself in self play
- Repeating action with oneself or others

Social Relations developed through:

- Expressing emotion
- Relating to familiar and unfamiliar people
- Responding to ones actions and feelings
- Playing with others

Creative Representation developed through:

- Pretending and role-playing
- Puppets and finger plays
- Exploring building and art materials
- Responding to and identifying pictures and photographs

Motor skills and movement developed through:

- Moving parts of the body
- Moving with objects
- Moving to music
- Manipulating objects

2 1/2 through 6 year olds

Intellectual Development Through Key Experiences:

Language is developed through:

- Verbally communicating and listening to others
- Listening to music and singing songs
- Role playing and dramatic play
- Listening to tape recorded stories along with books
- Beginning to identify meaningful words (own name, etc.)
- Beginning to write letters and symbols

Required Forms for Enrollment

Premier Preschools will provide the following forms that must be completed by parents prior to the child's first day:

___ **DHR Admission Form** (with all 5 signatures)

___ **Premier Preschool Admission Form**

___ **Signed Fee Schedule**

___ **USDA Eligibility Form**

___ **ASQ Parent Questionnaire**

Parents are responsible for providing the following information prior to the child's first day:

___ **Original Blue Card**- Parents are responsible for providing additional Blue Cards as they expire. Current Blue Cards are a requirement of continued enrollment.

___ **Copy of Child's Birth Certificate**

___ **Copy of Child's Social Security Card**

___ **Copies of any legal documents pertaining to custody or other matters regarding your child, if applicable.**



Enrollment Procedures

1. Pick up a Registration Form and tour campus.
2. **Parent Interview:** Both parents will meet with administration to discuss possible enrollment at Premier. Please allow ample time to address all questions you may have. Parents may bring children with them. Children will spend time in their prospective classrooms while parents meet with administration. If you feel your child will not be comfortable in the classroom without you, please notify administration **BEFORE** the interview to arrange alternative plans.
3. **Enrollment:** After the parent interview administration, will make an offer of enrollment, if we feel we can meet your family's needs. Parents may then pay the required registration fee of \$150.00, complete the necessary forms and determine a start date for their child. If parents are still unsure about enrollment at Premier, the process is suspended. If parents later determine that Premier is where they want their child to attend, parents will meet again with administration to complete the enrollment paper work.
4. Initial Registration forms will be kept on file for 1 year, regardless of enrollment. Families who do not enroll within that time must pay another application fee if they decide to enroll.

H. Child's preadmission record

DHR-CDC-739

Revised 1/06

CHILD'S PREADMISSION RECORD

This section is to be completed by the child's parent or guardian. This form must be kept in the child's file in the Child Care Facility (home/center).

| | |
|-------------------------------------------------------------|----------------------------------------------------------------------------|
| Child's Name: | Name child is known by: |
| Child's birthdate: | Child's home address: |
| Name(s) of parent(s)/guardian(s): | Home telephone number: () |
| Address of parent(s)/guardian(s): | |
| Mother's employer: | Father's employer: |
| Employer's address: | Employer's address: |
| Employer's telephone number: () | Employer's telephone number: () |
| List telephone numbers such as beeper, cellular phone, etc. | Instructions regarding how parent/guardian may be reached in an emergency: |

Person(s) to be contacted in an emergency if parent(s)/guardian(s) cannot be reached:

| Name | Relationship to child | Address | Telephone number |
|------|-----------------------|---------|------------------|
| | | | |
| | | | |
| | | | |

| | | |
|-------------------------|----------|------------------------------|
| Name of child's doctor: | Address: | Telephone number: () |
|-------------------------|----------|------------------------------|

Emergency Authorization:

I give permission for the child care facility to obtain emergency medical treatment, including emergency transportation, for my child if I cannot be reached immediately. I agree to be responsible for any emergency medical expenses incurred. (If parent/guardian refuses to sign, instructions must be attached stating what procedure the facility is to follow in an emergency.)

Signature

Date

Form not valid without signature of child's parent/guardian

Page one of two-form not valid without second page

Child's Preadmission Record (continued) - page two of two - form not valid without first page

Describe any special needs or instructions below:

| |
|--|
| |
| |
| |

Person(s) the child may be released to:

| Name | Relationship to child | Address | Telephone number |
|------|-----------------------|---------|------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

I understand that the Department of Human Resources does not inspect activities away from the child care facility (home or center). The licensee of the child care facility assumes full responsibility for such activities.

Signature of parent/guardian Date

I give permission for my child to participate in:

(Circle yes or no and sign each line)

| | | | | |
|------------------------------------------------------|-----|----|------------------------------|------|
| Activities away from the facility: | yes | no | Signature of parent/guardian | Date |
| Transportation provided by the facility: | yes | no | Signature of parent/guardian | Date |
| Swimming/wading activities provided by the facility: | yes | no | Signature of parent/guardian | Date |

Form not valid without signature of child's parent/guardian in each space indicated above.

This section is to be completed by the facility's staff.

Child's first day of attendance: _____ **Child's withdrawal date:** _____

Additional information may be attached.



ADMISSION DATA 2020

Confidential

Expected Admission Date: _____ Referral Source: _____

CHILD

Full Legal Name: _____ Preferred Name: _____

Previous School Attended: _____ Age: _____ Birth date: ____/____/____

Complete Home Address: _____ City: _____ Zip: _____

S.S. # _____ Sex: M _____ F _____ Ethnicity: _____

Race: _____ 1st Spoken Language: _____

ALABAMA STATE LAW REQUIRES the school maintains a file containing specified information on each student. This form must be completed, signed, and placed on file at the school prior to the first day of your child's attendance. It must be updated whenever a change occurs, and must be resubmitted annually. This form will accompany your child in case of an emergency so accuracy and completeness is of utmost importance.

PART 1: EMERGENCY LOCATOR

MOTHER OR GUARDIAN

Legal Name: _____ Preferred Name: _____

Home Address: _____ Zip: _____ Phone: _____

Occupation: _____ Employer: _____ Phone: _____

Business Address: _____ Zip: _____ S.S. # _____

e-mail address: _____ Cell #: _____

FATHER OR GUARDIAN

Legal Name: _____ Preferred Name: _____

Home Address: _____ Zip: _____ Phone: _____

Occupation: _____ Employer: _____ Phone: _____

Business Address: _____ Zip: _____ S.S. # _____

E-mail address: _____ Cell #: _____

Status of custody or Guardianship agreements: _____

A copy of your custody agreement is required, if applicable.

EMERGENCY HELP

A. Persons the School may contact in an emergency if those above cannot be reached and my child may be released to:

| | NAME | RELATIONSHIP | BUS. PHONE | HOME PHONE |
|----|-------|--------------|------------|------------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |

B. Please list instructions as to how parents or guardians may be reached during the time your child is in school (be specific):

PART 2: SPECIAL PERMISSIONS

FIELD TRIPS

Our child can participate in and be transported to and from school on "away from school" field trips, or other activities, if included in the school's program. We understand that the school will make every effort to notify us of upcoming field trips and to provide us with dates, times, and places as appropriate.

Transportation Information:

1. Premier Preschools have my permission to take my child on field trips.

Initials: _____

2. Premier Preschools have my permission to pick my child up after school on a daily basis.

Initials: _____ Elementary school attending: _____

3. For emergency purposes, Premier Preschools have my permission to evacuate the premises to the emergency evacuation site. This site is: Haven Baptist Church, 1840 Slaughter Road, Madison, AL 35758

Initials: _____

ACCIDENT OR ILLNESS

Should our child become ill or have an accident and it is the opinion of the school authorities that he/she requires a physician's attention and the school is unable to locate us, then the physicians named below, in order of preference as listed, may be authorized by school authorities to attend to our child.

1. *Dr. _____

**NOTE: This should be the doctor who maintains your child's medical records.*

I (we) do hereby state that I am (we are the legal guardian(s) of _____, a minor, age _____, born on _____, who resides with me at _____.

EMERGENCY

I (we) authorize, for emergency purposes only, any designated employee of the school to consent to any necessary examination, anesthetic, medical diagnosis, surgery or treatment, and/or hospital care to be rendered to the above named minor under the general supervision and the advice of any physician or surgeon; licensed to practice in the state of Alabama.

Allergies to drugs or food: _____

Please list any medications or pertinent information: _____

Medication Release

Premier Preschools will administer medication only after an approved DHR medication form has been filled out with appropriate dosage information, dates and times to be given, and medication left with the front office. Only prescription medication will be administered to children less than 2 years of age. Medication will be administered once daily at approximately noon. Additional charges may apply for more frequent administration.

Initials: _____ Comment: _____

Assessments and Evaluations

1. Has your child been evaluated by a Specialist or Professional such as a Speech Therapist, Occupational Therapist, Psychologist, Neurologist, Pediatrician, or Behavioral Specialist etc., for any medical, psychological or developmental concern? yes ☐ no ☐

If yes, was there a diagnosis given or therapy / treatment recommended? Please describe further: _____

2. I give Premier Preschools permission to administer educational and developmental assessments for the purpose of class placement, program evaluation and tracking individual child progress. Test instruments may include but are not limited to the administration of developmental checklists, ELLCO, LELA, Dibels, Phelps and Peabody. I understand I will be notified if and when my child is tested and given a written copy of the results of any test administered to my child. Initials: _____

3. I give Premier Preschools permission to share academic information about my child, to include assessment results as well as report card grades, with other educational and/or partnering agencies. I understand that I will be notified once information has been shared and any information shared regarding my child will be confidential. Initials: _____

Policies and Procedures

I have been provided **access** to a copy of Premier Preschools' Policies and Procedures and have read and agree to them. A soft copy may be found on Premier Preschools' website at premierpreschools.com. Hard copies are available in the Front Office, per request.

Initials: _____

Personal Property

Premier Preschools or any Premier employee will not be held liable for any lost, damaged, or misplaced items.

Initials: _____

Minimum Standards

As required by the Madison County Department of Human Resources, a copy of the Minimum Standards for daycare centers and night time centers is on file in the office and available to you at any time should you like to check it out. Please sign below that you understand this policy. Also available at <http://www.dhr.state.al.us>.

Initials: _____

Procurement Fee

Premier Preschools invest a considerable amount of time, effort and money into recruiting and training our employees. These individuals go through an intensive interview process so that we may evaluate and select teachers well qualified to care for and nurture your child. These individuals receive many hours of training before and during employment with Premier Preschools. A procurement fee of \$3000.00 will be charged to any family or individual who hires one of our staff members to care for a child who has been enrolled in our facility within the previous twelve months.

Initials: _____

Withdrawal

Tuition is paid to reserve your child's space in the program. No portion of the tuition will be refunded for absences. Should it become necessary to withdraw your child from the school, a **thirty-day written notice** is required to be submitted to the office. Premier Preschools reserve the right to dismiss any child, at the sole discretion of the Director.

Initials: _____

Returned Checks

In the event your check is returned, a non-sufficient funds (NSF) fee of \$35.00 will be posted to your account. Check will be automatically re-deposited.

Initials: _____

Photography Release

I, the parent of _____, authorize Premier Preschools to use any photographs and/or videos taken of my child while at school or participating in any school sponsored event in any advertising or other promotional venture to include the school's website, Facebook page, brochures, magazine articles or other media coverage. I understand that no identifying information (names) will be used. This permission will remain in effect until my child is no longer enrolled at Premier. I release the school or any of its officers from any liability connected to this use.

Initials: _____

Authorizing Signatures

We have read and understand all the above information and attest that all information provided of this form is correct to the best of our knowledge.

Signature of Parent /Guardian Completing this form: _____

Relationship to the Applicant: _____ Date: _____

Signature of other Parent /Guardian: _____ Date: _____

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions

Revised on 1.6.2020

This institution is an equal opportunity provider

participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA

by:

(1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider



Parents,

We are pleased to announce we are in the process of setting up a text messaging alert system. For this, we will need to know your cell phone carrier and which phone number(s) you would like alerts sent to. The alerts will be to notify you of any school closings or schedule changes.

Please fill out the following information and return this form to the school as soon as possible:

Child(s) Name (first and last): _____

Parent(s) to send alert (first and last): _____

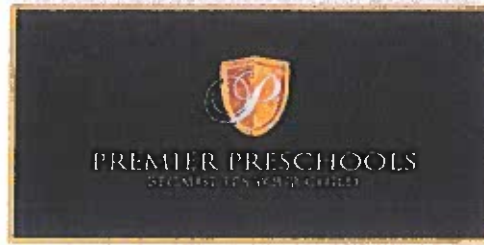
Phone number(s): _____

Cell phone carrier(s): _____

We appreciate your assistance in this matter.

Sincerely,

Premier Preschool Administrative Staff



Registration (Annual Fee) Non-Refundable

Family's Name: _____

Due to the time of your enrollment, your registration fee is

_____.
This fee is for the enrolling school year of August 2019 through July 2020.

**On February 24, 2020 Premier Preschools opened enrollment for the
(August 2020 through July 2021) academic school year.**

If you wish to enroll your child and/or family for the August 2020
through July 2021 school year, the registration fee is

_____.

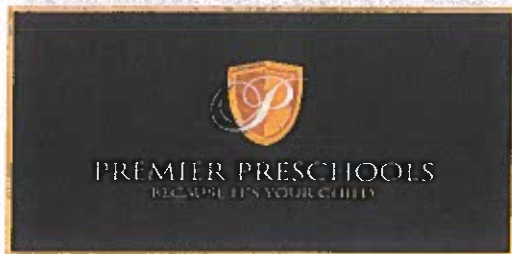
*****If your child and/or family remains in attendance after July 31, 2020***
and registration fees for the upcoming school year
(August 2020 - July 2021)
have not been paid the annual registration fees will be automatically added
to the account on August 3, 2020 for immediate payment.**

Parent Signature: _____

Date: _____

Enrolling Admin Initials: _____





Premier Preschool Fall Registration 2020

Child's Name: _____ Recommended Program: _____

REGISTRATION (Annual Fee): \$150.00 per child OR \$200.00 per family

Registration fees are non-refundable.

TUITION: Tuition rates are weekly rates due Friday before week of service. A consistent daily schedule must be agreed upon prior to enrollment in part day programs and must be strictly followed. Late pick up fees will apply for part day children not picked up at the agreed upon time.

| Classroom | 5 day | 3 day (M,W,F) |
|---------------------------|----------------------------------------------------------------------------------------|-----------------------|
| Infant/Toddler Full day | \$258.00 | \$233.00 |
| Early Preschool Full day | \$241.00 | \$217.00 |
| Preschool Full day | \$218.00 | \$197.00 |
| Pre-Kindergarten Full day | \$226.00 | \$204.00 |
| After-School | \$100.00 \$ 75.00 if sibling is currently enrolled in Premier's year-round programs | N/A N/A |
| Holiday Care | \$175.00 | (Daily rate \$ 47.00) |

Signature of Parent/Guardian _____

Date _____

My child **will not** be attending Premier Preschool in fall of 2019. My child's last day of attendance will be _____.

Please feel free to share with us any questions or comments you might have about Premier Preschools.
