

## For children entering PreK in FALL of 2023- Registration Opens March 20, 2023

### LOCATION = JORDAN ELEMENTARY SCHOOL First day of Early EdVentures is September 5, 2023 First day of preschool is September 11, 2023

\*\* If you have an unpaid balance from the school year (22-23) or Summer 2023 you will be put on a waiting list.

#### **Registration Fee**

- \$50 Registration is for the full school year of Kids' Company/Early Ed-Ventures programming.
- A non-refundable registration fee will be applied to your ActiveNET account.
- Your child must be registered in Early Explorers to attend Early Ed-Ventures.

## Early Ed-Ventures pricing for 2023-2024 School Year

4 & 5 year olds	<b>ALL day class</b> Attends EE, before only 6am - 8:30am Attends EE, after school 2:30 - 6pm	<b>8:30am - 2:30pm</b> \$11 a day \$13 a day
4 & 5 year olds	<b>Monday - Thursday</b> Attends EE, before and after	<b>12:15 pm - 3:15 pm</b> \$40 a day
3 & 4 year olds	<b>AM Classes</b> Attends EE, before only 6am - 8:30am Attends EE, before and after; or after	<b>8:30am - 11:00 am</b> \$11 a day \$40 a day
Non-Preschool Days	Attends EE ALL day Non school day with Field Trip Fun Day (on site special event)	\$40 \$60 \$42
Other Days	Late Start	\$6 each

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# CHILD INFORMATION

Name		DOB	
Name		DOB	
Mother's Name/Guardian	Best Num	nber to be reached at	Alternative Phone Number
E-mail Address			
Father's Name/Guardian		nber to be reached at	Alternative Phone Number
E-mail Address			
Student lives with: Both Parents	Father	Mother S	tepparents
If you have a custody arrangement	_	-	ase share below.
RELEASE AUTHORIZATI	ON		
We will release a child to either par take responsibility for your child in c			
Name	Relation	nship	Phone Number
Name	Relation	nship	Phone Number
PERMISSION TO SHARE	E INFORMAT	ION	
I, give to share information about my child	e Early Ed-Venture d,	s statt and Jordan Elen 	nentary School staff my permission yes no
My child has an IEP (Individual Educ	cational Plan)	yes no	
If yes, I give my permission for Early	Edventures to hav	ve a copy of my child's	IEP for their files yes no
Other information that you feel we	need to have on	file for your child.	
Medical Information			
	Name of Med	lication Daily:	
Hospitalization/Reason:		Physical Proble	ms:
Chronic Illnesses:	Allergies	:Die	Restrictions:

 $\textbf{Early EdVentures } \underline{\textbf{CANNOT}} \text{ administer medicine without a medical permission form - \textit{Please ask for a form if needed!}$ 

Office: Registration Fee Fall \_\_\_\_

If your child has any special concerns/needs that we should be aware	e of, please share here
I agree to release Kids' Company Programs: Early Ed-Ventures and all of its emor injuries that may occur during childcare. In the event of any emergency, I gobtain medical help, including the services of a rescue squad or emergency represends that I will be held responsible for all medical expenses.	give permission to Kids' Company staff to
Parent/Guardian Signature	Date
FIELD TRIP PERMISSION POLICY	
SCHOOL YEAR: I understand if my child attends Early Ed-Ventures on a will be attending the scheduled field trip.	NON SCHOOL DAY - FIELD TRIP DAY, <b>they</b>
I have read and understand Kids' Company/Early Ed-Ventures's Fi to attend the scheduled field trips if they are in attendance.	eld Trip Policy. I give my child permission
BEHAVIOR GUIDELINES	
We have designed rules based on promoting child safety and positive behavior philosophy of Love and Logic. This philosophy enables the c control and decision-making while improving self-concept, behavior, cempowers children to learn from their mistakes and gain responsibility designed our rules at the children's developmental level. Our goal is t course of behavior before a rule may be broken. We believe in praisir positive role models.	hildcare providers and children to share and achievement for each child. It over their own choice. We have to intervene and redirect to change the
We expect our students to display J-Town Pride, which is the model of and Responsible behavior.	Jordan Elementary's Safe, Respectful,
When an inappropriate behavior occurs these are the steps that will b	e taken:
<ol> <li>Children are given a warning.</li> <li>Children are asked to take a break from the activity.</li> <li>An email is composed to parents with the child to make them</li> <li>If behavior continues, a meeting is scheduled to determine a parents.</li> </ol>	
Early Edventures may not be suitable for all children. Prior to suspension ensure that all options have been exhausted.	on or termination of care, our staff will
I have read and understand the Early Ed-Ventures Behavior Guide	elines above.
PARENTAL CONSENT: Initial is required	
•	
I give permission for my child to be included in photographs that are relocated Early Ed-Ventures, and all Kids' Company programs for presentation or p	
I understand that I must enter the building to sign in and out my child ea	ch day.
I give permission for my child to leave the school premises with Early Ed-\ in an authorized school bus or van.	Ventures/Kids' Company for walks or field trips
<ul> <li>I understand that it is my responsibility to inform the Early Ed-Ventures sta form phone number, address, release authorization, medical changes, and I agree to pay for the days contracted, regardless of my child's attendation.</li> </ul>	or schedule changes.
I agree to pay for the days confidence, regardless of thy child's affected I understand that a 2 week notice is required if I will be withdrawing my a	
Lunderstand that Lwill be charged a \$10 childcare fee if Ldo not notify F	. •

a scheduled day.

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I understand that it is my r	ged a \$25 late fee if my child is not picke esponsibility to read the <b>Parent Handboo</b> ne policies could result in the dismissal of I	<b>k</b> online and to follow the policies & procedures
I have read and unders	has to be potty trained to attend Early Editand the Early Ed-Ventures Parental (	Consent above.
Name of student	Preschool Class:	Please check your child's class
MWF 8:30-11	M-Th 12:15-3:15	T/Th 8:30-2:30
T/Th 8:30-11	MWF 8:30-2:30	
Name of student	Preschool Class:	Please check your child's class
MWF 8:30-11	M-Th 12:15-3:15	T/Th 8:30-2:30
T/Th 8:30-11	MWF 8:30-2:30	
<ul> <li>Please walk your child</li> <li>Please sign your child</li> <li>Please come into the</li> <li>We have a 45 minute</li> <li>Breakfast is served ed</li> <li>Snacks are served tw</li> </ul> Billing is completed r	d has the choice of HOT lunch daily of into the building to sign them. It in/out on the IPAD. It building to sign your child out. It body break each day. In morning. It is a day for Early Ed-Ventures from	the snack cart and send a water bottle. <b>Dunt.</b> With any billing questions, please contact
	ds' Company program. I certify the in	in the Jordan School District 717 to identify the information given above is true and complete
Parent/Guardian Signature	Parent/Guardian Pri	nted Name Date

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