

4148 Providence Place New Orleans, LA 70126 Phone: (504) 816-8585 preschool@nobts.edu

<u>Registration Forms 2023-2024</u> <u>General Information</u>

| Child's Name | Gender | Birth Date | | |
|---|--|---------------------------|------|--|
| Child's preferred name (name child is o | called) | | | |
| Father's name | Mother's Name | | | |
| Dad's religious preference | Church me | mber, where? | | |
| Mom's religious preference | religious preference Church member, where? | | | |
| These next questions will | l help us better care for y | our child: | | |
| Describe your child's past illnesses | | | | |
| Describe any developmental delays | | | | |
| Describe any allergies | | | | |
| Describe any dietary restrictions | | | | |
| Please tell us about your child's: | | | | |
| Likes | | | | |
| Dislikes | | | | |
| *Any additional information that you we | ould like to share with us? | Please use the space belo | w or | |

the back of this packet, if needed.



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Registration Forms 2023-2024 Tuition Agreement

| Child's Name |
|--|
| Date of Admission: |
| *Are you a student or staff member of NOBTS? YESNO |
| If yes, please provide your NOBTS ID number |
| I agree to pay a non-refundable registration fee of \$ |
| I agree to pay a monthly tuition fee in the amount of \$ |
| My child will attend (please check one): |
| Three daysFive days. |
| For those in part time care, please circle the days your child will attend. Please note, upon a conversation between the parents and the director, these dates can be changed based on the family's need and room availability. |
| Monday Tuesday Wednesday Thursday Friday |
| I understand that <u>tuition is due by the fifth of every month</u> . Tuition not paid in a timely manner may result in the dismissal of my child from the program. Tuition payments may be money order, check, e-check, and credit or debit card. (Please note, an additional fee will be charged for e-check, credit and debit cards.) A fee of \$60.00 will be charged for all NSF checks. A two week written notice is required upon withdrawing from the Early Learning Center of NOBTS. <u>I also understand that there is no discount in tuition for holidays, sickness, emergency closings, absenteeism, or vacations. I remember I am paying for my child's spot and not his/hattendance.</u> |
| Parent's Signature Date |



Registration Forms 2023-2024 Family Information

| Child's Nam | e Gender _ | Birth Date | |
|------------------|--|---------------------------------------|------|
| | Mother | Father | |
| <u>Name</u> | | | |
| <u>Address</u> | | | |
| <u>Email</u> | | | |
| Employer | | | |
| Cell # | | | |
| Work # | | | |
| Home# | | | |
| medicine that ha | Medical At ze Early Learning Center of NOBTS, to care for my as been authorized in writing by the parent or guar me or those that I have listed on the following pag | rdian and to secure emergency medical | |
| Parent's Signo | ature Date | Parent's Signature | Date |
| Describe any | allergies | | |
| Describe any | dietary restrictions | | |
| Child's Docto | r's Name | Phone | |
| Child's Dentis | t's Name | Phone | |
| Hospital Prefe | rence | | |

^{**} Please remember that we need a current immunization for your child upon registration.



2023-2024 Emergency Information and Pick Up Authorization

| individuals that they may be asked to | show proof of ider | tity.) | |
|---------------------------------------|--------------------|-----------------------|---|
| | | | |
| | | Relationship to Child | |
| Phone Numbers: Cell | Work | Home | _ |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | | | |
| Individual's Name | | Relationship to Child | _ |
| Phone Numbers: Cell | Work _ | Home | |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | | | |
| | | Relationship to Child | |
| Phone Numbers: Cell | | Home | |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | | | |
| Individual's Name | | Relationship to Child | |
| Phone Numbers: Cell | | Home | |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | 1 | | |
| Individual's Name | | Relationship to Child | |
| Phone Numbers: Cell | | Home | |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | 1 | | |
| Individual's Name | | Relationship to Child | |
| Phone Numbers: Cell | Work _ | Home | |
| ☐ Emergency Contact | | | |
| ☐ Authorized to Pick Up | 1 | | |



Registration Forms 2023-2024 Recordings and Photographs

Parental Awareness of Recordings

| I am aware that the Early Learning Center of NOBTS utilizes recordings and/or taping of my child | | | | |
|---|---|--|--|--|
| such as digital recordings, videotaping, audio recordings, or web cam while in the center for observation/security purposes. Due to confidentiality, I understand that should a situation occur | | | | |
| | | | | |
| | | | | |
| | | | | |
| Parent's Signature | Date | | | |
| | | | | |
| | | | | |
| <u>Permission to Rel</u> | <u>ease Photograph</u> | | | |
| I give permission for the Early Learning Ce | enter of NOBTS to release a | | | |
| photograph/recording of my child | to the Early Learning Center of | | | |
| NOBTS. (Child's r | name) | | | |
| I understand these photographs may be used in | the classroom, in the hallways, and in art | | | |
| projects. I further understand that my child's pict | rures will not be shared on public publications | | | |
| such as newsletters, brochures, websites, or socio | al media without my permission, verbally or | | | |
| written. | | | | |
| | | | | |
| | | | | |
| Parent's Signature | Date | | | |



Registration Forms 2023-2024 Social Media Consent and Release Form

The Early Learning Center uses Social Media as a way to celebrate the successes of our students and staff and share new things going on in our classrooms. Please follow us on Facebook to keep up with important reminders, announcements, and weekly activities.

We at the ELC strive to honor each families request regarding social media permission however; we cannot be responsible for the postings of each individual family. As a reminder and a courtesy, please only post pictures of YOUR child at the ELC setting.



Registration Forms 2023-2024 Parent Handbook

I have received a copy, either a hard copy or electronic, of the parent handbook. I have read and understand the contents of the Early Learning Center of NOBTS Parent Handbook. I agree to the policies written therein.

| i also received a list of parer | it resources, which is located on the back page of the |
|---------------------------------|--|
| parent handbook. | |
| | |
| | |
| | |
| Parent's Sianature | Date |



Registration Forms 2023-2024 Non-Vehicular Excursion Authorization

| My child,, has my permission to participate in the (child's name) | |
|---|--|
| , | n are walking and accompanied by staff of the center: |
| Type of Activity | |
| □ Bye-Bye buggy | |
| □ Neighborhood walk | |
| □ Other | |
| This authorization is valid for one y | vear from the date below. |
| | |
| Parent's Signature | Date |
| *Examples of non-vehicular excur | rsions would be a nature walk around the neighborhood. |



Registration Forms 2023-2024 Authorization for the Application of Topical Products

| Child's Name: | |
|---------------|--|
| | |

walking to the NOBTS library, Sunshine Park, Post Office, etc...

I give permission for center staff to apply the following topical products to my child whether center - provided or parent - provided:

| Yes () () () () () () () | o sunscreen insect repellant diaper rash cream other (Name) | |
|--------------------------|--|-------------------------|
| This one ti | ime authorization will remain in effect until a new au | uthorization is signed. |
| Parent's S | Signature | Date |



Registration Forms 2023-2024 Water Play Activities Permission Form

| My child(child's name) | has permission to participate |
|---|-------------------------------|
| in the following type of water play activities: | |

*Water tables,

*Water play day in the summer months, which may include sprinklers and other water play day activities.

| Date |
|-------|
| Baile |
| |
| |



Registration Forms 2023-2024 Holiday Schedule

The Early Learning Center will be CLOSED on the following dates for the holidays listed.

2023

LABOR DAY – Monday, September 4, 2023

THANKSGIVING – NOON on Wednesday, November 22, 2023 through Friday, November 23, 2023. We will reopen normal hours Monday, November 26, 2023.

CHRISTMAS AND NEW YEAR'S – The ELC of NOBTS will be closed Monday, December 25, 2023 through Monday, January 1, 2024. We will reopen normal hours Tuesday, January 2, 2024.

2024

MARTIN LUTHER KING, JR DAY - Monday, January 15, 2024

MARDI GRAS - Tuesday, February 13, 2024

GOOD FRIDAY - Friday, March 29, 2024

^{*}Permission must be updated at least annually.

^{*}If activity is off-site, transportation authorization is required and regulations regarding transportation must be followed.

Memorial Day – Monday, May 27, 2024

INDEPENDENCE DAY – Thursday, July 4, 2024

ANNUAL TEACHER TRAINING – July 22-26, 2024 (ELC **CLOSED**, annual teacher training)

Special Events

Parents are offered many opportunities for involvement each year. For all events, parents and family are welcome to come and participate. Watch emails and postings concerning any changes. Our annual events include, but are not limited to the following:

| Parent Meeting | Tuesday, August 8, 2023 | 6:00-7:30PM |
|-----------------------------------|--------------------------|---------------|
| Fall Fest | Friday, Oct. 20, 2023 | 5:30 - 7:30PM |
| Thanksgiving Feast | Friday, Nov. 17, 2023 | lunch |
| Christmas Program & Party | Wednesday, Dec. 13, 2023 | lunch |
| Mardi Gras Parade (rain or shine) | Friday, Feb. 2, 2024 | 3:30PM |
| Teacher Appreciation Week | May 6-10, 2024 | all week |
| Muffins with Mom | Friday, May 10, 2024 | 7:30-9:00AM |
| PreK Graduation Day | Wednesday, May 15, 2024 | 10:00AM |
| Donuts for Dads | Friday, June 14, 2024 | 7:30-9:00AM |