

Lifelong learning starts here!

DHR-CDC-739

Revised 1/06

CHILD'S PREMISSION 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 birth date:	Child's home address:
Name(s) of parent(s)/ guardian(s):	Home telephone number: ()
Address of parent(s)/guardian(s):	Email
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:

Relationship to child	Address	Telephone number
	Relationship to child	Relationship to child Address

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

Emergency Authorization:

I give permission for the child 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

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.

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630 3rd Avenue West Birmingham, AL. 35204

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KIDS FIRST DEVELOPMENTAL ACADEMY

CHILD CARE CONTRACT

_____ Full Time _____ Part Time

Every child in attendance at Kids First Developmental Academy must have a signed Child Care Contract on file.

Please initial next to each item. We want to be sure you understand and agree to these policies.

I understand that I must provide a completed immunization form to the center.

______ i understand daycare payment is due Monday all fees paid after Tuesday will incur a **\$10.00** late fee.

______ I understand that fees are based on five days per week including all Holidays and absences and must be paid in full. Some exceptions apply.

I understand if any child is out an entire week due to illness (M-F), no payments is due. I must have a doctor's note and will be allowed 1 week out due to illness per year. If a child is to be withdrawn to accompany parents on a vacation, and at least two week notice given to the office, no fees will be charged for 1 week out of the year.

I understand child care fess are due weekly. I further understand that if my fee is (2) week behind that my child will not be admitted to the center and will not be allowed to return until all fees are paid in full.

______ I understand the late pickup fee is **\$1.00** per minute and must be paid before the child can return to the center.

______ I further understand the any child who is picked up late **3** times in **1** month will be dropped from the program.

i understand that if my child's behavior in the class presents a situation that is continuously disruptive or a danger to himself/herself or others he or she will be removed from the program.

i will pick my child up at_____ pm. If I am going to be late I will call the center to notify on time I will be picking up my child(ren).

Sign_____

Date_____

Print Child(ren) name(s).



Kids First Develpmental Academy, Inc.

630 Third Avenue West Birmingham, Alabama 35204 205-323-5431 Fax 205-323-4535 320 Tuscaloosa Avenue S.W.Birmingham, Alabama 35211205-251-4353 205-251-4328

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Student Media Consent and Release Form

Throughout the school year, students may be highlights in efforts to promote Kids First East activities and achievements. For example, students may be featured in materials to train teachers and/or increase public awareness of our schools through newspapers, radio, T.V. the web, DVDs, displays, brochures, and other types of media.

I, as the parent of ______, hereby give Kids First East and its representatives, and authorized media organization permission to print, photograph, and record my child for the use in audio, video, film, or any other electronic, digital and printed media.

I, as parent of ______, hereby **DO NOT** give Kids First East and its representatives, and authorized media organization permission to print, photograph, and record my child for the use in audio, video, film, or any other electronic, digital and printed

- A. This is the understanding that neither Kids First East nor its representative will reproduce said photograph, interviews, or likeness for any commercial value or receive monetary gain for use of any reproduction/broadcast of said photograph or likeness. I am also fully aware that I will not receive monetary compensation for my child's participation.
- B. I further release and relieve Kids First East, its Board of trustees, and representatives from the liabilities, known or unknown, arising out of the use of this material.

I certify that I have read the Media Consent and Release Liability statement and fully understand its terms and conditions.

Please understand that failure to return this release form within ten (10) school days from the date of distribution will constitute approval of the above requests.

Please print
Name of child______
Signature of Parents or guardian_____

Date_____



Kids First Supply List

Nursery (Birth to 18months)

Formula (already in bottles) Bottles and/ or sippy cup Diapers 2 sets of changing clothes



2 sets of changing clothes Sippy Cup if needed Top and bottom cover for cots Pull-Ups

Prechool (2.5 years to 4 years)

Change of clothes 2 pairs of underwear Top and bottom cover for cot

Pre-K (4 years to 5 years)

Change of clothes Top and bottom cover for cot 2 boxes of Crayola Crayons, 2 pocket folders 2 jumbo pencils <u>School Age (5 & up)</u> A Chapter Book Coloring or activity book





Please label all your child's belongings





Tuition and Fee Information 2019-2020 School Year

Tuition and Fees are subject to change

Tuition	Age Group Infant/Toddler 0 weeks-2.5 yrs.	<u>Weekly</u> \$142.00
	Preschool 2.5 – 5 yrs.	\$134.00
	School-age 5-13 yrs.	\$110.00
	After Care	
	Allel Udle	\$55.00

Fees	\$35.00	Annual Enrollment Fee	201
	\$50.00	Annual Program & Supply Fee (Children 2.5-5 yrs.)	
	\$100.00	Graduation Fee	Νοι
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Additional Information

- Tuition includes breakfast, lunch and an afternoon snack.
- Parents of infants and toddlers will provide diapers, formula, & Change of clothes.
- Daily enrichment activities such as music, creative movement, And use of computers will be a regular part of the curriculum (Depending on age of child) and will be covered by the tuition.
- There will be occasional fees for field trips (3 year-olds and up) Such as Children's Theatre and Zoo. These are optional.

2018-2019 Holidays and Center Closings		
Nov. 22, 23	Thanksgiving	
Dec. 24, 25, 26	Christmas	
Dec. 30	New Year's Day	
Jan. 1	New Year's Day	
Jan. 21	MLK Day	
May 27	Memorial Day	
July 4,5	Fourth of July	