



2022-2023 Daycare Enrollment Application

Date of registration: _____ Start Date: _____ Discharge Date: _____

Class: _____ Days: _____ Times: _____

**A \$100 non- refundable registration fee is due with the enrollment application.
Please print legibly.**

Child's Last Name _____ First Name _____ M _____ Male _____ Female _____

Name to be used at school _____ DOB _____ / _____ / _____ Age _____

Child's Primary Language _____ Parent/Guardian's Primary Language _____

Child's Home Address _____ City _____ Zip _____

Subdivision _____ School District # (ex: 204) # _____ Elementary School _____

Primary Phone _____ Primary Email: _____

Parent/Guardian Marital Status: Single Married Divorced Widowed Primary Residence: Mother Father Both

List Family members your child lives with- include names and ages of siblings: _____

Parent/Guardian Information:

Parent/Guardian #1: Name _____ Email: _____

Address if different from above _____ Cell Phone _____

Business Name: _____ Occupation: _____

Business address: _____ Business Phone _____

Parent/Guardian #2: Name _____ Email: _____

Address if different from above _____ Cell Phone _____

Business Name: _____ Occupation: _____

Business address: _____ Business Phone _____

Parent/Guardian Signature: _____ **Date:** _____

Child's Name _____

Emergency Contact & Release Persons:

In the event of an emergency, **if parent/guardian cannot be reached**. Please list in priority order the persons you authorize to pick up or accompany the child for purposes of medical treatment. A child will not be released to anyone (other than a parent) under the age of 18, including siblings. Please list the person(s) you would like authorized to pick up your child on a given day (i.e. babysitter). Please indicate if they are emergency contact and release or just release.

Mandatory:

Name _____ Relationship to child _____

Home Phone _____ Cell Phone _____

Email address _____ City, State, & Zip _____

Check one: **Emergency Contact and Release** **Release Only**

Optional:

Name _____ Relationship to child _____

Home Phone _____ Cell Phone _____

Email address _____ City, State, & Zip _____

Check one: **Emergency Contact and Release** **Release Only**

Optional:

Name _____ Relationship to child _____

Home Phone _____ Cell Phone _____

Email address _____ City, State, & Zip _____

Check one: **Emergency Contact and Release** **Release Only**

Medical Information

Child's Physician's Name _____ **Phone** _____

Address _____ **City** _____ **State** _____ **Zip** _____

I (we) _____ and _____, do hereby state that I am (we are) parent(s)/legal guardian(s) of _____, authorize, for emergency purposes only, a school-designated employee to transport the above minor by ambulance and consent to any necessary examination, anesthetic, medical diagnosis, surgery or treatment, and/or hospital care to be rendered to the minor under the general supervision of any physician or surgeon licensed to practice medicine in the State of Illinois.

Enrollment Registration Information Authorization for Medical Treatment of a Minor In the event of a medical issue requiring a physician's care, would you like us to call your family physician? Yes _____ No _____

Please provide the following information:

Dentist Name: _____ **Practice/Clinic Name:** _____

Address: _____ **Phone:** _____

Child's Name _____

General Health

Please list any health or special concerns **Just for KIDS Preschool** should be aware of, such as allergies, disabilities, or medications. _____ My child has none. _____ My child has the following (*Please be very specific, noting all foods, etc.*).

Allergies (Please check and list all that apply)

Food: Allergen: _____
Reaction: _____

Medication: Allergen: _____
Reaction: _____

Food Restriction/Other: Allergen: _____
Reaction: _____

Are any of these allergies life-threatening? ___ yes ___ no Does your child have an epi-pen? ___yes ___no

Pest Management

Integrated pest management is a method for managing damage by pests with the least possible hazard to people, property, and the environment. This method of managing pests includes the careful use of pesticides such as insecticides, herbicides, rodenticides, and fungicides. Integrated pest management also requires that parents or guardians have a right to prior written notice of pesticide applications. I have read and understand the Just For Kids Preschool integrated pest management (2022-23). Just For Kids will issue a written notice prior to all applications performed on the property at 2575 Plainfield/Naperville Rd., Naperville, IL 60564.

Signature of Parent/Guardian _____ Date _____

Parent Handbook, Discipline, Discharge, & Late Pick-Up Policy

I/We hereby acknowledge that I/we have read, understand, and agree to the Discipline Policy, Discharge, and the Late Pick-Up Policy as they are stated in the **Just For KIDS Preschool** Parent Handbook.

Parent/Guardian Signature _____ Date _____

General Authorization

I hereby grant **JUST for KIDS Preschool** permission for the child named above to: **Y/N**

- ___ (A) Take part in all program activities including the use of indoor and outdoor equipment
- ___ (B) Be photographed or videotaped during daily program activities
- ___ (C) Use Photograph on Brightwheel
- ___ (D) Use photograph for advertising (No names used)
- ___ (E) Use photograph on the Just For Kids Website (No names used)
- ___ (F) Use photograph on the Just For Kids Facebook page (No names used)
- ___ (G) Be given first aid treatment for minor cuts, scrapes, bumps, or bloody nose
- ___ (H) Be given prescribed medications provided by the parent as directed by written instructions from a physician (a log will be kept of administered medications)
- ___ (I) Share contact information with parents of classmates

Parent/Guardian Signature _____ Date _____

Child's Name _____

Daycare Program

Age	Part Time Premium <small>< 30 hours or 2/3 days</small> < 30 hours/week	Full Time Premium <small>30+ hours or 4/5 days</small> 30-45 hours/week	Full Time Premium Plus 46-55 hours/week
INFANTS/Garden 3 mo. - 14 mo. *	___\$84.40/day	___\$378.00/week	___\$393.40/week
TODDLER/Barn 15 mo.-2 yrs.	___\$79.60/day	___\$326.75/week	___\$343.40/week
2 Years Old/Farm	___\$79.20/day	___\$326.15/week	___\$341.70/week
3 Years Old/Safari	___\$74.40/day	___\$291.30/week	___\$307.00/week
4-5 Yrs. Pre-K/UTS	___\$74.00/day	___\$289.90/week	___\$305.50/week

Select one and fill in days and times.

___ **PART TIME PRESCHOOL PREMIUM: Part Time:** less than 30 hours/week

___ **FULL TIME PRESCHOOL PREMIUM: Full Time:** 30-45 hours/week

___ **FULL TIME PREMIUM PLUS: Full Time** 46-55 hours/week

Write in times

	Mon	Tue	Wed	Thu	Fri
Time in:	_____	_____	_____	_____	_____
Time out:	_____	_____	_____	_____	_____

Total Hours per Week: _____ **Weekly Cost:** _____

My child will need: _____ Breakfast _____ A.M. Snack _____ Lunch _____ P.M. Snack

Date of registration: _____ Start Date: _____ Discharge Date: _____ (Office Use)

	Mon	Tues	Wed	Thurs	Fri	Class Time
Toddlers	___	___	___	___	___	_____
2 Years Old	___	___	___	___	___	_____
3 Years Old	___	___	___	___	___	_____
4/Pre-K	___	___	___	___	___	_____

Payment Processing Information 2022-23

Daycare

- Daycare is billed weekly unless other arrangements are made.
- Just For Kids accepts **cash, check, automatic withdrawal from your checking- ACH (\$3 fee per transaction), bill pay through your bank, Master Card, Visa, and DISCOVER. A 3% service fee will be added to all MC, VISA, and DISCOVER transactions.** Payments by check can be put in the pocket of your child's school bag, dropped in the outside mailbox, or mailed directly to Just For Kids. If payment is not received by the 15th of the month, you will be notified and a late fee will be assessed.

Payment Processing Options for 2022-23 Tuition Payments

Please select your payment option for the school year:

_____ EFT from your checking account (\$3 fee per transaction)

_____ Credit Card monthly rebill (A 3% transaction and fee will be charged)

_____ Bill Pay through checking

_____ Personal checks and Cash

Parent Name _____

Parent Signature _____ Date _____

Child Name _____