



Owner: Judy Feinstein

Director: Kathy Gaughan

SUMMER 2024 ENROLLMENT ATTENDANCE INFORMATION

INSTRUCTIONS: All accounts must be current for your enrollment forms to be accepted. Summer Supply Fee is due when you turn in your Summer Enrollment Forms. The Twos thru PreK (4) students must have been that age on **9-1-2023** to enroll in the corresponding program.

CHILD INFORMATION

First Name		Middle Name	Last Name	Ethnicity
Date of Birth	Age	GENDER: Female Male	Child Lives With: Both Parents Mom Dad Guardian	

PROGRAM

(Kindergarten Summer Campers must be entering 1st Grade in Fall of 2024. Kinder-6th please enter T shirt size)

Infant ___ Toddler ___ Twos ___ Threes ___ Pre-K (4's) ___ Summer Camp (K-6th) ___ T-Shirt Size ___

If your child attended FBISD in 2023/2024, please provide school name, address, phone and Grade attended in 2023/24 school year.

School Name: _____ Address: _____ Phone: _____ Grade: _____

NUMBER OF DAYS ATTENDING

2 Days T/R ___ (No infants) 3 Days M/W/F ___ (No infants) 5 Days ___

DAILY PICKUP

Half Day (by 12:00 PM) (Toddler – PreK only) ___ Extended Day (by 2:30) ___ (Toddler-6th Only) Full Day (After 2:30) ___

LUNCH HOME SCHOOL

**Please fill in the approximate daily arrival and departure times of your child so we may staff appropriately.*

Normally, my child will attend Towne Creek School from _____ AM to _____ PM

Please choose the Monthly or Weekly plan for the Summer 2022

I choose to enroll my child for the entire summer and pay the monthly rate. (Infants-PreK only)	Monthly Rate: \$ _____
	Lunch (if applicable): \$ _____

I choose to enroll my child on a weekly basis. (Twos – 6 th Grade) I have indicated the weeks my child will attend in the section below	Weekly Rate \$ _____ + Lunch \$ _____ X
	Number of Wks: _____ = Total: \$ _____

Please indicate the weeks your child will attend (if you chose Weekly Rate):

	Closed May 27 Memorial Day Wk 1: May 28 to May 31		Wk 5: June 24 to June 28		Week 9: July 22 to July 26
	Wk 2: June 3 to June 7		Closed July 4 th & 5 th Wk 6: July 1 to July 3		Week 10: July 29 to August 2
	Wk 3: June 10 to June 14		Wk 7: July 8 to July 12		Week 11: August 5 to August 7
	Wk 4: June 17 to June 21		Wk 8: July 15 to July 19		Closed Aug 8 & 9 Make Ready Days

SUMMER ENROLLMENT 2024

PARENT/GUARDIAN INFORMATION

Child's Name: _____

PARENT/GUARDIAN CONTACT INFORMATION			
Parent/Guardian completing the form:	Relationship to child	Home Phone	Cell Phone
Home Address (please include city and zip code)	Preferred email address (to be used for school contact)		
Employer and Address		Work Phone/Ext	
Driver's License Number			
Secondary Parent/Guardian	Relationship to child	Home Phone	Cell Phone
Home Address (please include city and zip code)	Preferred email address (to be used for school contact)		
Employer and Address		Work Phone/Ext	
Driver's License Number			
Identification Information: What is the first name of your best friend in elementary school?			

EMERGENCY CONTACT AND RELEASE INFORMATION (Do not include Parent information)

If possible, please notify the school in an Emergency Contact will be picking up your child on any given day.				
Name #1	Relationship	Address	Phone	Cell
Name #2	Relationship	Address	Phone	Cell
Name #3	Relationship	Address	Phone	Cell
Name #4	Relationship	Address	Phone	Cell

The Towne Creek School Staff will release your child to leave Towne Creek only to the people listed above. **For the safety of your child, we will request all Emergency Contacts with whom the staff is not familiar, to provide a photo ID at time of pickup. Your child will not be released without prior authorization.** In the event you call into the school to authorize someone different to pick up your child, The Identification information you listed above will be used to verify your identity and to authorize the release of your child.



Child's Name: _____ TUITION PLAN AND POLICIES 2024

All Accounts must be in good standing to accept enrollment in the new session.

_____ **PLAN I (Only if you are registering for four weeks or less for the summer)**
I have registered my child for four weeks or less for the summer and will pay my entire tuition by June 3, 2024.

_____ **PLAN II (Available to students attending 5 weeks or more for the summer)**
I would like to make monthly payments. This payment is due on the 1st of every month and past due on the 3rd of the month regardless of which day the 1st or 2nd falls on (including weekends and/or holidays). There is a \$45.00 late fee applied on the 3rd to past due accounts.

_____ **PLAN III (Available to students attending 5 weeks or more for the summer)**
I would like to make two (2) equal monthly payments. The first payment is due on the 1st of every month and past due on the 3rd of the month regardless of which day the 1st or 2nd falls on (including weekends and/or holidays). The second payment is due on the 15th of the month regardless of which day the 15th falls on. There is a \$45.00 late fee applied to past due payments on the 3rd and/or the 16th of the month.

PLEASE INITIAL ALL OF THE POLICIES LISTED BELOW

I HAVE READ, HAD THE OPPORTUNITY TO ASK QUESTIONS, AND UNDERSTAND THAT:

- _____ my enrollment paperwork will not be accepted if I have an outstanding balance on my account.
- _____ If my child has a diagnosed food allergy, I must provide a Food Allergy Emergency Plan prior to my child's first day at school.
- _____ Discounts of any kind will be withdrawn if timely payments are not made.
- _____ Towne Creek accepts checks or money orders as forms of payment, or you may set up automatic payments with ACH or credit card through the SmartCare App. There is a convenience fee associated with using a credit card. No cash payment over \$30 will be accepted.

REGISTRATION FEES

- _____ there is a Registration Fee for the twos, threes, and PreK during the 2024 Summer Session. Registration fees hold a place in the program for my child/children and are NON-REFUNDABLE if my child/children do not attend. Registration fees are to be submitted with enrollment paperwork. *There is no registration fee for Infants or Toddlers as theirs is an annual fee.
- _____ Kindergarten through sixth grade will have a \$50 non-refundable Summer activity fee which will hold their place in the summer camp program.

SCHEDULE CHANGES/ WITHDRAWING A STUDENT

- _____ should I need to reduce the number of days or hours my child attends The Towne Creek School, at any point after May 10, 2024, I will be charged a \$75.00 change fee. There is no change fee if I increase my child's days/hours
- _____ a two-week written notice is required when withdrawing my child for any reason. I will be responsible for paying tuition two weeks from the day a withdrawal notice is given.
- _____ my child attends only on his/her registered days. There is no exchanging one day for another. I will be charged a drop-in fee if my child attends on an unscheduled day.
- _____ should I choose a 2 day or a 3-day monthly schedule for my child, these days must stay the same throughout the entire summer. Any change will result in a \$75.00 change fee.
- _____ failure to make timely tuition payments may result in a withdrawal requested by **The Towne Creek School**.

EXTENDED TIME RATE

- _____ when a child is registered to leave at 12:00 or 2:30 and needs to stay longer on a specific day, or when a child is not picked up at his/her designated pick-up time, there is an hourly charge of \$12 for any hour, or portion thereof, that my child is here past his/her designated pick-up time. (THIS RATE DOES NOT APPLY TO END OF DAY HOURS).

END OF DAY AFTER HOURS PICK-UP RATE

- _____ if I pick up my child after the Towne Creek closing time, or after the early closing time, I will be charged per child, as follows:
a) 0 to 5 minutes \$10.00 b) 6 to 10 minutes \$20.00 c) 11 to 15 minutes \$30.00 d) 16+ min add \$2.00/ minute



DAILY DROP-IN RATES

_____ there is a Daily Drop-In Rate available if I need The Towne Creek School services for an additional day on an occasional basis. Drop-Ins must be approved by the front office and are approved based on classroom availability. There is a drop-in rate sheet available at the front office.

NSF Fees

_____ there is a \$35.00 NSF fee for any returned check. After two returned checks, I must pay tuition by cashier's check or money order.

MISCELLANEOUS FEES

_____ there are additional fees which may occur during the summer. These may include school lunches (if not included in tuition payments), t-shirt purchases, field trips and any other expenses that directly pertain to my child. These expenses will only occur with my permission.

FIELD TRIPS, TRANSPORTATION, WATER ACTIVITIES

_____ if a student drops in on an unscheduled day and there is a field trip that day, they will be charged both the price of the field trip and the drop-in rate.

_____ Field trips are part of the curriculum and if my child does not wish to attend, I will need to make other childcare arrangements for that day. A refund will not be issued.

_____ If my child attends a field trip, he/she must wear their Towne Creek T-shirt. A summer camp T-shirt is included in the tuition of Kindergarten through 6th grade Summer Campers.

_____ Students must ride the Towne Creek van both to and from the field trip. Parents are not allowed to drop their child off at, or pick their child up, from the field trip site.

_____ I give consent for my child to leave the school for outdoor exercise and educational purposes, with the understanding that my child will always be accompanied by Towne Creek Staff and under proper staff supervision. If my child is leaving school campus, I will be given a specific permission slip to sign for each field trip.

_____ I give consent for my child to be transported by The Towne Creek School via school vans in case of emergency evacuation or on field trips (Kindergarten and older). I will be given a specific permission slip to sign for each field trip.

_____ I give consent for my child to participate in the following water activities (water table and sprinkler play) while at the Towne Creek School. I will be given a specific permission slip for wading and swimming pool play.

Photographs/Videotape

I give permission for my child to be photographed and videotaped at the school for (Initial all that apply)

_____ Classroom labeling and posters

_____ Sharing with parents on the SmartCare Parent App

_____ During program functions and field trips (could be photographed by both Towne Creek staff and possibly other parents).

Public Relations

_____ I give permission for photographs or video of my child to be used by **The Towne Creek School** and/or others with The Towne Creek School's consent, for the purpose of illustration, advertising, publication, or promotion.

_____ I also give consent to the use of their name in the newsletter, website, Facebook, newspaper, or as described above. (Last names will not be used without signed parent consent).

**ENROLLMENT INFORMATION SUMMER 2024
PARENT AGREEMENT**



Child's Name: _____

PARENT AGREEMENT

Please initial each item below indicating that you have been made aware of **The Towne Creek School's** policies and procedures.

I HAVE READ, HAD THE OPPORTUNITY TO ASK QUESTIONS AND UNDERSTAND...

- _____ all policies contained within **The Towne Creek School** Parent Handbook found on the website (www.thetownecreekschool.com/admissions). I agree to abide by all policies including but not limited to code of conduct, immunizations, procedures to visit Towne Creek, illness and exclusion criteria, dispensing medication, appropriate dress, meals and food service practices, suspension and expulsion, emergency plans, safe sleep, procedures to discuss concerns with director, discipline and guidance, field trips, etc.
- _____ the philosophy of **The Towne Creek School**.
- _____ that Child Care Licensing regulations are on file at the school and are available to review upon request. I may also visit their website at www.dfps.state.tx.us/Child_Care/ and click on standards and regulations.
- _____ that arriving five to ten minutes before the opening activity may be helpful in smoothing the transition from home to school and will ensure that my child is in attendance for the opening activity.
- _____ that children enrolled in the preschool programs for ages three and up must be fully toilet trained.

School Closures/Holidays throughout the Summer

- _____ **The Towne Creek School** will be closed Memorial Day (May 27th), July 4th & 5th, and August 8th & Aug 9th (for Fall Make Ready Days)
- _____ The Towne Creek School reserves the right to close when there are possible hazardous weather or health conditions and Parents will be notified of closures due to weather or emergency via group text, email, the website home page, and Facebook. **If FBISD is closed due to weather, Towne Creek will be closed as well.**
- _____ there will be no fee reduction due to absences of any kind if you choose the monthly rate. This includes illness, vacation, holidays, pandemics, or weather conditions. Refunds for extended closures due to a pandemic or other disaster will be determined by the owner. If you choose the weekly rate; you pay only for the weeks you have registered your child.

Gang Free Zone

- _____ Under the Texas Penal Code, any area within 1,000 feet of a childcare center is a gang-free zone. Criminal offenses related to organized, criminal activity is subject to harsher penalties.

Illness/Medication

- _____ if my child exhibits any signs of illness, or they have a doctor's appointment in the morning to determine the source of their illness, I will not bring them to school until they are feeling better, or I have a doctor's note stating when they can return to school.
- _____ if my child is exhibiting signs of an unhealthy condition; I will be called to pick up my child immediately. **I understand that Licensing requires the parent, (or other authorized person), to pick up the sick child from the school within one hour of being notified.**
- _____ if my child is sent home due to fever, vomiting or diarrhea, they will not be allowed to return until they are **symptom free** for at least 24 hours without the aid of fever reducing or other medications. **NO EXCEPTIONS WILL BE MADE. If your child has been diagnosed with a communicable disease, he/she will not be allowed back to school without a doctor's note stating they are no longer contagious. If a child is diagnosed with COVID-19, you will need to follow current CDC COVID guidelines before returning.**
- _____ **The Towne Creek School** will only administer medication prescribed for my child by a physician. (Over the counter medications will only be given if deemed medically necessary by a physician and are accompanied by a doctor's note.) Medication will be dispensed at 11:30 a.m. and 3:30 p.m. ONLY.
- _____ If my child has a diagnosed food allergy, I must submit a Food Allergy Emergency Care Plan, signed by my child's physician and me and that this form must be submitted prior to my child's first day of school. If I do not supply this form, my child will be unable to attend school until it is on file at Towne Creek.

**ENROLLMENT INFORMATION SUMMER 2024
PARENT AGREEMENT (continued)**



Child's Name: _____

Lunch Program

- _____ I may enroll my child in the lunch program monthly during the Summer and/or school year and I am responsible for payment for the entire month. Any notification to enroll or withdraw from the lunch program must be made in writing, no later than the last Friday of the month before the enrollment or withdrawal is to take place.
- _____ I understand that if my child has specific dietary requirements that Towne Creek is unable to meet with our menus, I will send a lunch and/or snack that does fulfill his/her needs.
- _____ If I choose to provide a home lunch, Towne Creek will not be held responsible for its nutritional value or for meeting my child's daily food needs. Please note: We are unable to warm any food items brought from home.
- _____ I may purchase a school lunch for my child with advance notice. (Lunches must be ordered at least one week prior to the day they will be needed).
- _____ I understand that an AM and PM snack are included in my tuition. Information on school lunch and snacks can be found on our website and menus are posted in my child's classroom.
- _____ School lunch is included in Toddler tuition.

Suspension/Expulsion

When a child exhibits a pattern of consistent aggression, we will use our knowledge and resources to guide those aggressive tendencies into positive behaviors. Knowing that behaviors cannot change overnight, we must also set a time frame within which we will allow these inappropriate behaviors to continue.

- _____ a child who, because of inappropriate behavior, requires the teacher's attention and time to an extent where other children's needs are not being met, will be refused continued attendance.
- _____ a child who causes disturbance and bodily harm to other children, adults, or to school property, may be refused continued attendance at Towne Creek.
- _____ a child who is deemed unable to learn in the school environment may be refused continued attendance at Towne Creek.
- _____ tuition is NON-REFUNDABLE in the event a child is asked to withdraw from the school or is suspended for any length of time.

FIRST AID

Please indicate the items that may be administered to your child if the need arises while at school.

I hereby authorize the Towne Creek School to administer the following medications(s) and/or first aid treatment(s) in the event of an incident that may occur at school. This consent will also include any off-campus situation (i.e., field trips) while a child is in the custody of the Towne Creek School. There is an understanding that every effort to contact the parent will be made; however, if the parent/guardian cannot be reached, treatment is always documented and placed in the child's file folder to be retrieved by the parent at their convenience.

- ___ Antiseptic Wipes ___ Cotton Balls ___ Bandages ___ Thermometer
- ___ Vinyl gloves ___ Sunscreen (non-aerosol) ___ Mosquito Repellent (non-aerosol)

***Please Note:** Splinters cannot be removed by Towne Creek Staff. We will clean the area and contact the parent to notify them of the presence and location of the splinter.

PRESCRIPTION MEDICATION: I understand that all prescribed medications must be signed in at the front office and an Authorization for Dispensing Medication form filled out. Medication must be in its original container with the child's name on it, the dosage and date and expiration to be administered by The Towne Creek School. Over-the-counter medications will only be administered if prescribed by a physician and accompanied by a doctor's note stating why the medication is necessary. Medication times are 11:30 a.m. and 3:30 p.m. ONLY.

Items such as lotions, ointments, teething medication, powders, baby wipes, and insect repellent (non-aerosol spray only) are not provided by The Towne Creek School. If you bring them for your child, please let their teacher know as these must go home weekly. By supplying these items, you are giving consent for Towne Creek to apply them to your child.



ENROLLMENT INFORMATION 2024 ALLERGIES/SPECIAL NEEDS

Child's Name: _____

PRESCRIPTION MEDICATION: I understand that all prescribed medications must be signed in at the front office and an Authorization for Dispensing Medication form filled out. Medication must be in its original container with the child's name on it, the dosage and date and expiration to be administered by The Towne Creek School. Over-the-counter medications will only be administered if prescribed by a physician and accompanied by a doctor's note stating why the medication is necessary. Medication times are 11:30 a.m. and 3:30 p.m. ONLY.

Items such as lotions, ointments, teething medication, powders, baby wipes, and insect repellent (non-aerosol spray only) are not provided by The Towne Creek School. If you bring them for your child, please let their teacher know as these must go home weekly. By supplying these items, you are giving consent for Towne Creek to apply them to your child.

ALLERGIES and or SPECIAL NEEDS: List any special needs that your child may have, such as environmental allergies, food intolerances, existing illness, injuries and hospitalizations during the past 12 months and any other information which caregivers should be aware of:

Does your child have diagnosed food allergies?		Yes	No	If yes, FARE plan submitted on:		
Medication/Food Allergies	N/A _____	MILD	MODERATE	SEVERE	LIFE THREATENING	REACTION
Special Needs:	N/A _____	If yes, please describe any special care or accommodations that must be provided:				

For any special needs or diagnosed allergies that are either severe or life threatening, you must provide specific instructions as to the actions to be taken. **A Food Allergy Emergency Care Plan** signed by physician and parents must be on file, prior to the child's first day, for any child diagnosed with a food allergy. **PLEASE NOTE: Medication cannot be administered without a physician's note AND a signed Authorization for Dispensing Medication form on file.**

CHILD'S MEDICAL CARE PROVIDER	
Primary Care Physician (PCP) name	Practice/Clinic Name
PCP Address:	Phone:
Preferred hospital/Clinic for emergency care:	
Health Insurance Provider and Policy Number:	

I understand that if my child has a severe allergy of which I am aware, an epinephrine pen and/or any other medication deemed medically necessary will be provided and left at the front office of the school. In case of a medical emergency, I give The Towne Creek School my permission to use the prescribed medications.

Emergency Medical Attention In the event that I cannot be reached, I authorize **The Towne Creek School** to give consent for all necessary emergency medical treatment for my child while in the custody of **The Towne Creek School**. In addition, the person in charge may accompany my child to the medical facility should the need arise.

Parent Signature: _____ Date: _____



ENROLLMENT INFORMATION 2024
MEDICAL INFORMATION

Child's Name: _____

Date of Birth: _____

THIS FORM MUST BE SIGNED BY YOUR CHILD'S PEDIATRICIAN PRIOR TO ENROLLMENT IN THE TOWNE CREEK SCHOOL

Table with 6 columns: Required, 1st, 2nd, 3rd, 4th, 5th. Rows include immunizations: DTP/DtaP, Polio IPV or OPV, MMR, PNEUMOCOCCAL, HEPATITIS A, HEPATITIS B, *VA RICELLA, INFLUENZA, MENINGOCOCCAL, HAEMOPHILUS INFLUENZAE TYPE b, TB TEST (if required).

For additional info regarding immunizations, visit TX Dept. of State Health Services at www.dshs.state.tx.us/immunize/pulic.shtm

NOTE: A vision and hearing screening must be completed within 30 days of a child turning 4 years old. VISION: Right 20/____ Left 20/____. HEARING: 1000 Hz, 20000 Hz, 4000 Hz. SIGNATURE: _____ DATE: _____

HEALTH CARE PROFESSIONAL STATEMENT

I have examined the above-named child and find that he/she is physically able to attend the Towne Creek School.

Health Care Professional's Signature _____ Date _____

PARENT OR GUARDIAN STATEMENT

*My child had varicella disease (chicken pox) on or about _____ and does not need the varicella vaccine. Date _____

PARENT OR GUARDIAN OF AFTERSCHOOLERS

My child has a current immunization record on file at _____ (Name, Address and Phone of Public School)

**If medical diagnosis and treatment and/or immunization and TB testing conflict with your religious beliefs or may be injurious to your child or family, you must sign an affidavit to that effect or obtain a certificate by health care professional and attach it to this form.

All About Me (Infants thru Towne Creek Kinder Only)



Dear Parents:

Please take a few minutes to tell us about your child. This information will aid in a smoother adjustment period and help ensure that we provide the best quality education and care for your child.

My name is: _____ Nickname (if applicable) _____ Boy ____ / Girl ____

Date of Birth: _____ Hair Color: _____ Eye Color: _____

My Parents are:

Mother: _____ Father: _____

My Stepparents are: _____

Siblings: Please list all siblings' names and ages:

My Pet(s) is/are:

Other schools and/or childcare facilities attended: Please list name(s) and reason for leaving.

Please list any special needs or allergies that your child's teacher should be aware of. Note any specific care needed:

In the space below, please tell us about your child's interests, hobbies, and any fears they might have:

Please Share any information about your child that you believe would help us in working with him/her: (i.e., personality, character traits, when upset I., favorite/least favorite foods)



Summer 2024 Splash & Free Swim Permission Slip

Two of our favorite summer activities at Towne Creek are Splash Days and Free Swim! Your permission must be granted in order for your child to participate.

Twos use Sprinklers Only on Splash Day

Threes use Sprinklers, kiddie pools, or the water slide for Splash Day

PreK thru 6th grade will utilize all of the above on Splash Day. They also have scheduled Free Swim Days at our pool. The pool is always monitored by lifeguards whenever children are present.

Water activities begin May 28, 2024

Please print clearly

My child, _____ has permission to play in the sprinklers, splash in the “kiddie pools”, slide on the water slide and/or swim in the pool on his/her designated water days for the dates of May 28, 2024, through August 2, 2024.

I will send a towel, sunscreen, swimsuit, and swim shoes on each day that my child plans to participate. I understand that sunscreen should be applied at home and can be sent with my child in a labeled, original container. (No aerosol sprays are allowed). Teachers can reapply as needed.

Print Parent's Name: _____

Parent Signature: _____ Date: _____