



ENROLLMENT AND SCHOOL CONTRACT INFORMATION

REGISTRATION: ALL REGISTRATION FORMS MUST BE SIGNED AND DATED BY THE PARENTS OR LEGAL GUARDIANS FOR EACH CHILD ENROLLED IN THE BUSY BEES MONTESSORI SCHOOL (hereinafter the “School”).

1. APPLICATION FORM AND CONTRACT FORM

2. HEALTH FORM– A health form (to be provided) must be current within six months of this application and is due on or before Contract’s start date.

3. BIRTH CERTIFICATE.*

4. SUMMARY OF LICENSING STANDARDS RECEIPT

SUPPLIES NEEDED:

1. Two sets of clothes with name on tags. (Including underwear and socks)

2. Inside gym shoes with name on tags for walking children. (will put them on at arrival)

3. Diapers, pull-ups, wipes, diaper rash ointment (whatever your child uses).

4. Disinfecting wipes for sanitizing the classroom as needed.

5. Blanket with name on tag and a cot sheet (Order online at lakeshorelearning.com)

INFANTS: sleep sack and small crib sheet (will be washed by parents every week).

6. INFANTS: We welcome you to bring breast milk. It must be defrosted, labeled, and dated. We will store in the refrigerator for the day and will return the unused portion to you at the end of the day. If you choose formula, it must be prepared in the bottle, labeled, and dated.

7. INFANTS: Two bibs with your child’s name on the tags (will take turns with parents to be washed).

ARRIVALS AND DEPARTURES:

Please send your child clean and comfortably dressed for the day and make your goodbye brief. Toys brought from home are not allowed and we will not be responsible for outside toys. We will have a daily health inspection and we will wash your child’s hands upon arrival. No one other than the parents or a designated person will be allowed to pick up your child without making prior arrangements. No child will be admitted after 9:30 a.m. unless is because of a doctor’s appointment , parents must call to let us know about a late arrival and must bring a note from the doctor. Breakfast will not be served after 9:00 a.m. If your child is going to be on an scheduled absent please let us know as soon is possible. For same day absence you should call before 8:00 am.

*DUPLICATE BIRTH CERTIFICATE: A certified copy of child’s birth certificate or other reliable proof of the child’s identity and age such as a passport, visa or other governmental documentation must be presented within 30 days of enrollment. If, after 30 days, this documentation is not presented, an additional 10 more days will be granted for compliance. Local law enforcement will then be immediately alerted. Should a passport or visa be submitted in place of the birth certificate, parents are to provide a sworn affidavit stating why a birth certificate is unavailable. (Public Act 95-0439)



BEHAVIORAL STRATEGIES

BEHAVIOR MANAGEMENT AND DISCIPLINE: Below are strategies Busy Bees staff will use to respond to child misbehavior. It is always a good idea if rules are explained fully and are understood before any misbehavior occurs. Whenever possible, we will include your child in making rules for the classroom.

- **Redirection**

This strategy will be used most frequently when working with young children. If a child is not following the rules or is being uncooperative, we will quickly get the child's attention and introduce another activity. For example, "Kate, please help me water the flowers now. You've been riding the bike for a long time and it's Logan's turn."

- **Logical consequences**

These are structured consequences that follow specific misbehaviors. The child should be able to see how the behavior and the consequence are directly related. For example, Andrew is standing on his chair at lunch. His teacher will remind him that if he stands on his chair, he could fall and get hurt. While this may make him sad, it will remind the child of logical consequences.

- **Participate in the solution**

If a child damages something, he/she needs to help in fixing it or in cleaning up. If a child causes someone distress, he/she should help in relieving that. For example, "It made Brandon very sad when you told him he wasn't your friend anymore. Please come apologize and help me make him feel better."

- **Natural consequences**

Allowing children to experience the consequences of their behavior is also called learning the hard way. For example, Laura does not put her books back in her school bag after she finishes reading. One day she loses a book, and therefore must find a way to replace it. *We use natural consequences only if they will not endanger a child's health or safety.*

- **"Take a break" or "Calm down chair"**

In some instances, a child may need to be removed from a particular situation in which he/she has become overwhelmed or violent. The child should be directed to "take a break" or sit in the "calm down chair." This strategy gives the child a chance to calm down, regain control, and reflect quietly on his/her behavior away from others. Staff will talk with the child about the actions that led up to and resulted in needing a break or being sent to the calm down chair. For example, "Hannah, we have talked often about how hitting is not acceptable. But because you hit John, please go to the calm down chair. I will talk to you when you are ready."

If these actions do not help in reducing or changing behavior the following will take place:

1. Staff will report behavior and what strategies have been attempted to the Director and/or Assistant Director.
2. The Director and/or Assistant Director will observe the child and meet with the Lead Teacher to develop a behavior management plan.
3. The behavior management plan will be discussed with the parent and then put into practice.
4. The Director and/or Assistant Director, Lead Teacher and Assistant Teachers, and parents will evaluate the behavior management plan. If needed, adjustments will be made.

*** If a child's behavior becomes threatening to themselves, other children, staff or teachers, the child will be removed from the classroom and possibly the program.*



TUITION AND HOURS

HOURS: FULL DAY: 7:00 a.m. – 5:30 p.m.

PARTIAL/FULL: 8:00 a.m. - 5:00 p.m.

Broken down weekly, the tuition rates for attending Busy Bees Montessori School are set forth in the following charts:

INFANTS, TODDLERS, AND TWO-YEAR OLDS:

PROGRAM	5 DAYS A WEEK	4 DAYS A WEEK	3 DAYS A WEEK
FULL DAY	\$330.00	\$320.00	\$260.00
PARTIAL/FULL	\$310.00	\$300.00	\$240.00

THREE-SIX YEAR OLDS: Must be three years old and potty-trained to qualify for this rate.

PROGRAM	5 DAYS A WEEK	4 DAYS A WEEK	3 DAYS A WEEK
FULL DAY	\$300.00	\$290.00	\$240.00
PARTIAL/ FULL	\$280.00	\$270.00	\$220.00

REGISTRATION YEARLY FEE: \$50 due with enrollment. SCHOOL YEAR 2019-2020: Sept 1st-August 31st.

TUITION: Tuition payments are due on the 1st Monday of each month for the upcoming month and will adjust to 4 or 5 Mondays in the month. There is open enrollment all year if there is an available place for your child. Registration must be renewed for the next school year on or before March 1st. There is an option to pay tuition biweekly at the discretion of the School Administrator. Tuition includes lunch, breakfast and afternoon snack except for infants whose parents provide their own food. Tuition rates may be subject to change. The School will give a minimum of one month’s advance notice of any change in tuition rates.

DEPOSIT FOR YEARLY CONTRACT: This contract is for a complete school year. A deposit equaling one month of tuition will be required upon registration. The deposit will be used towards the 4 weeks of August if you don’t enroll for the next school year. If for any event you decide to withdrawn before the end of August your deposit will not be refunded. If a parent enrolls more than one child in the School, a separate deposit must be paid for each child.

ALL PROGRAMS: The School is operated on a yearly tuition basis. Parents should therefore be advised that the School will not exchange days or discount payments because of missed school days whether because of illness, holidays, professional days, personal vacations, school calendar vacations, school closing emergencies or any other reason.



FEES

PENALTIES: If tuition payments are not timely received, a five dollar late fee will be assessed for each day the balance is outstanding. Continued late payments may result in termination of the contract in the Administrator's discretion.

LATE PICK UP OR EARLY DROP OFF CHARGES: School hours are firm. Charges will apply for any early drop offs or late pick ups. The charge will be assessed at \$1.00 per minute. Payment is made for staff and school inconvenience. Payment should be in cash but checks for late pick ups may be accepted. Checks should be written out to the order of the specific staff member staying with your child. It is convenient that you call if you know you are going to be late. If the child is not picked up by 5:30 and you have not call, we are going to call you but if we can't reach you the emergency contacts are going to be call in order to pick up the child; and if for any reason we can not contact anyone and the child is not picked up by 5:45, the police is going to be call and you have to pick him/her up on the police station.

NSF: For any check returned for insufficient funds, a fee or \$30.00 plus late fees will be accessed.

SUMMER PROGRAM: We offer scheduled summer program and if parents wish to spend more time with their children, they may have the option to reduce the full time program to the minimum of 3 days program. This option shall be granted at the administrator's discretion.

KEY CARDS: The cost of the key cards is \$10 dollars due at enrollment. If your keycard gets damaged, lost or stolen there is a \$10 dollars replacement key.

MUSIC CLASS FEE: We have music together program on Thursdays at the 2 years old class and 3-6 class and the cost is \$200 for 2 seasons.

FUNDRAISINGS: Parents are committed to participate in 2 fundraisings during each school year.



I L L N E S S P O L I C I E S

ILLNESS AND MEDICINE:

If the child becomes ill during school hours, a parent or guardian will be contacted immediately to remove him/her within one hour of being notified. Once the child is removed from school due to illness, they may not return for a full 24-hour period unless a doctor's note is provided stating that the child is well. If we have to give medicine to your child please bring the copy of doctor's prescription with the medicine in its original container and the pharmacy labels on it. You also will need to fill out a authorization to administer medication form.

For minor bumps and bruises, we will provide first aid.

Please do not bring your child to School if she/he is sick. Per the health department regulations children will not be allowed to attend School if they exhibit symptoms such as:

- *rush fever (100 F. or higher),
- *excessive cold and or cough,
- *excessive runny nose,
- *vomiting,
- *diarrhea,
- *lice or nits,
- *discharge from eyes,
- *discharge from ears,
- *unusual drowsiness,
- *persistent or excessive crying,
- *communicable diseases (chicken pox, Rosella, conjunctivitis, mumps, measles, influenza).

MEDICAL EMERGENCIES :

In case of a serious accident or sudden illness requiring medical attention, the following procedures are followed:

1. A phone call to 9-1-1 is made.
2. The child's parent, guardian, or emergency contacts are called.
3. The child's health records are taken to the emergency service provider.

It is extremely important THAT PARENT'S KEEP EMERGENCY CONTACT INFORMATION UP TO DATE AND CORRECT. If the injury is serious (i.e. needs stitches, broken arm, or dislocations, etc.), parents will be responsible for all costs involved in emergency medical treatment, including emergency transportation if required.



POTTY TRAINING: Our policy is that if a child is observed to be ready for potty training we will inform his/her parent so that they can initiate the process. We will work as a team with you in order to make this a positive experience for your child. We will not punish any child for a potty accident and only positive and gentle coaching will be given. It is very important that you get involved in the process in order to make this a healthy transition for your child.

DIAPER CHANGES: For children using diapers, diapers will be checked and changed every 2-3 hours or more frequently if required. Each child will be diapered after waking up from his/her nap. Hand washing is performed after each change. All children will take a nap at or around noon.

VISITS, TRIPS, AND EXCURSIONS: We will visit the park often and we will plan a few field trips during the year. For field trips, you will be notified in advance and you will need to sign the permission slip and pay any transportation fees, if applicable.

FOOD: We provide children with breakfast and lunch. The snack is provided by parents. Allergies and special diets must be made known to us. We can put your child on a special diet only with a doctor's note and parents are responsible for their own child's meals if their child is on a special diet. We ask that outside food and candy not be brought into the School. Food for birthdays and special occasions is welcome with prior notice to the School. However, food brought for these occasions must be commercially bought and in their original sealed packages. We meet the USDA minimum meal requirements and established guidelines.

GENERAL INFORMATION:

1. Please sign in at arrival and sign out upon departure.
2. The first week of each month, you will receive a letter informing you of upcoming School activities.
3. We will provide you with a written daily report of your child's day except for 3-6 classroom.
4. Children will not be denied enrollment on the basis of sex, race, religion or disability.
5. **PRIVACY POLICY:** We will keep personal information on the children and their families private. However, DCFS will have access to that information.
6. We will speak Spanish to the children on a daily basis unless otherwise instructed.
7. Feel free to call or e-mail (preferred) at any time.
8. If a School item is broken or damaged by a child, the child's family will take it home to fix or replace it.
9. Infants may use pacifiers during rest time. To reduce the likelihood of spreading illness, pacifiers must be kept in a child's cubby or diaper bag during all other times of the day .

INSURANCE POLICY : The School shall carry public liability insurance in the single limit minimum amount of \$300,000 per occurrence.



APPLICATION FORM

Start Date: _____

Child's Name: _____ DOB _____ Gender _____

Address: _____ City, State, Zip _____

Child's Pediatrician: _____ Phone: _____

Address: _____ City, State, Zip _____

Mother's Name: _____ E-mail _____

Home Phone _____ Cell: _____ Work phone _____

Home Address _____ City, State, Zip _____

Employer's Name _____ Work hours _____

Address _____ City, State, Zip _____

Father's Name: _____ E-mail _____

Home Phone _____ Cell: _____ Work phone _____

Home Address _____ City, State, Zip _____

Employer's Name _____ Work hours: _____

Address _____ City, State, Zip _____

Cell Phone Provider: Mother _____ Father _____

Emergency Contact: *

Name _____ Relationship _____

Address _____

Home phone _____ Cell _____ Work _____

Please list all persons to whom the child may be released:*

1. Name _____ Relationship _____

Address _____ Phone _____

2. Name _____ Relationship _____

Address _____ Phone _____

*if you wish additional persons to be emergency contacts or authorized to pick up your child. please add that information on a separate sheet of paper.



APPLICATION FORM

SOCIAL HISTORY: Is your child adopted? _____ age at adoption: _____ Does your child know? Y N

Marital Status of Parents: Single _____ Married _____ Living Together _____

Separated _____ How long _____ Divorced _____ How long _____

Stepfather _____ How Long _____ Stepmother _____ How Long _____

Custody/visiting arrangements: _____

Siblings of Child: Name _____ DOB _____ Grade in school _____

Name _____ DOB _____ Grade in School _____

By nature, is child: friendly _____ assertive _____ shy _____ withdrawn _____

What frightens your child: animals _____ storms _____ loud noises _____ strangers _____ other _____

Does child like to be read to _____ listen to music _____ ride a tricycle _____

Does your child have experience playing with other children _____

DEVELOPMENTAL HISTORY: Speech Problems _____ Hearing Problems _____

Age at which child first independently : sat _____ walked _____ slept through the night _____

named simple objects _____ repeated short sentences _____ began toilet training _____

Is child toilet trained? _____ Word used for urination: _____ bowel movement: _____

Does your child dress him/herself? _____ Undress? _____ Is child right or left handed? _____

What time does the child usually eat breakfast? _____ lunch? _____ dinner? _____

Any eating problems? _____ Is the family vegetarian? _____ Any food allergies? _____

Likes milk _____ cold _____ warm Likes to play with water? _____ go barefoot? _____

What time does your child go to bed at night? _____ awaken? _____ does child sleep well? _____

Take a nap? _____

Favorite indoor play activities? _____ Outdoor play activities? _____

Does child have any other problems that we should be aware of? _____

What method of behavior control/discipline is used in your home? Please explain: _____

In what particular ways can we help your child? _____

What are your expectations of our program? _____



CONTRACT ACKNOWLEDGMENT PAGE

I agree to register to my child : _____ at Busy Bees Montessori School for the hours from _____ a.m. To _____ p.m. For: **M T W Th F**

All provisions of the Enrollment Information, including the Tuition, Hours, and Fees Provisions of this Document are expressly incorporated into this Contract and by signing this Contract the Undersigned expressly bind themselves to all obligations on their part to be fulfilled.

Your signature on this Contract grants Busy Bees Montessori School, without more, permission for the following:

1. To allow paramedics to take your child to the nearest hospital for emergency treatment and you will be responsible for the emergency medical charges.
2. To use your child’s photograph for purposes of school publicity and on the school’s website unless you have specifically and in writing stated that your child’s photograph may not be so used.
3. To take your child on walking excursions around the neighborhood with other written permission.
4. To allow staff to apply first aid and CPR when necessary.
5. To allow staff to apply to your child topical ointment when necessary.
6. To have your child nap daily.
7. To participate and cooperate on school fundraisings. (Parents)
8. To administer prescribed medicine to your child as specified in the prescription’s directions for administration and as specified by a physician’s note.
9. To administer over the counter medicine to your child as specified on written instructions signed by a parent/guardian or your child’s physician.

I am responsible to provide snacks for my toddler and preschooler and all meals for my infants –2years old.

I consent to the School commissioning an Integrated Pest Management program the first Friday of each month.

I am aware that there are video cameras recording and they are to be used at the administrator’s discretion. I understand the late pick up procedures and regulations.

I acknowledge that if I terminate this contract before August 31st 2019, your deposit will not be refunded.

I have read the entire enrollment, application and contract forms, and I understand their contents. I have filled out all forms honestly and completely, and agree to their terms and conditions.

GUARANTEE OF PAYMENT: I acknowledge that all tuition, fees, and deposits are non-refundable as set forth herein. In the event of any breach by the undersigned of the terms and conditions of this Contract, the undersigned agree (s) to pay all attorney’s fees, court costs, and/or collection agency fees or commissions. All parents/guardians must sign this Contract and agree to its terms and conditions.

SIGNATURE OF PARENT/GUARDIAN DATE

SIGNATURE OF PARENT/GUARDIAN DATE