

Helpful Information About Your Child

Is this your child's first time in school?

Was your child premature?

What language does your child speak? _____
For those who do not speak yet. What language does your child understand or follow directions in?

Please remember for parents of students 0-3 years old, pacifiers, sippy cups, toys, blankets, and bottles are not permitted in school and please adjust your child to these changes prior to your child commencing school. Infants in the baby room are an exception for bottles and pacifiers. We will need your infants schedule from home for the first two weeks of school, your child will gradually be transitioned into our infant room schedule. Thank you for your cooperation.

Section 10-12.025(2) EAC, requires a current physical examination (Yellow Form 3040) and immunization record (Blue form 680-681) to be on the file prior to the child being admitted for enrollment.

Section 402.3125 (5), F.S. requires that parents receive a copy of the Child Care Facility Brochure. "Know your child care center".

Section 10M-12.025 (4)2. EAC requires that parents are notified in writing of the disciplinary practices used by the child care facility

Any property or belongings left at the school for over ten (10) calendar days will be donated. We are not responsible for items left behind.

We Reserve The Right To Refuse Service At Anytime.

By signing below, you verify that you have received the above items, the policies are accepted and that all information on the enrollment form is complete and accurate.

Parents' Signature: _____ Date: _____
Parents' Signature: _____ Date: _____

Child Release Form

Child's Name: _____

Please note the following:

1. It is legal for either parent to pick up their child unless we have a copy of the court order restricting violation or unless it is noted on this form.
Persons **PERMITTED TO PICK UP CHILD**:

Mother: Yes _____ No _____ Father: Yes _____ No _____

2. In the event that you are unable to pick up your child, you must provide a code word. Parents will have to provide in writing, by fax or by leaving a letter in the office with instructions on the person assigned to pick up the child for that particular day. The person who is sent must give this code word and identification to the **DIRECTOR ONLY** in order for the child to be released. The Director **WILL NOT** release any child under any circumstances if this code word is not given, **NO EXCEPTIONS!** Please remember this is for the safety of your child. To avoid sending faxes constantly on the same adult, it is suggested that the parent add the adult to the front of the application. This will provide permanent permission to that same adult.

The Code Word Is: _____

Disciplinary Approval

Disciplinary procedures implemented at Aventura Learning Center, are redirected attention, verbal warnings, taking a away playtime and time out. We will explain to the child as clearly as possible as to why they were disciplined. The director will notify the parent in extreme situations. Any child who has three signed accident/incident notices on the fault side will be asked to be removed from the center. By signing below, we as parents understand and approve and accept these disciplinary procedures.

Parents' Signature: _____ Date: _____
Parents' Signature: _____ Date: _____

Financial Agreement

Both parents are to initial next to each numbered (1-26) & A,B,C policy:

- _____/_____. 1. Students that are sick, are to stay home and a doctor's note will be required to return to school. Any child that is sick at school will be sent home and parents will be phoned to pick up their child. We can not care for ill or sick children in our facility. Please make sure to bring in your doctors' note upon returning to school!
- _____/_____. 2. It is mandatory and expected that all parents are to complete 10 hours of "Mandatory Commitment Hours", "MCH" throughout the school year in different areas of the school. A yellow "Visitor" sticker will be provided. Summer field trips do not count. Parent is responsible for 10 "MCH" hours per child enrolled no matter what the enrollment date is. Your \$50 will be collected upon enrollment and will be refunded as a (ALC) credit once the 10 hours are completed..
- _____/_____. 3. Cash or checks are accepted, for tuition payment. Tuition is due and to be paid monthly, on the 30th of every month in advance for the month. The "Return Check fee" is \$25.00, this returned payment will be repaid in CASH with the return check fee immediately upon being informed of "the return check". A 2nd return check automatically puts the parent on a "CASH" basis only. Post dated checks are considered late and will have a late fee added. Tuition paid after the 2nd is considered late and a fee of \$10 per day/late fee will be charged. If tuition is not received on the 2nd of the month, your child will not be accepted to attend school and late fee's will be incurred.
- _____/_____. 4. Registration and tuition payments are Non-refundable.
- _____/_____. 5. In order to maintain their space at the center, tuition must be paid on time. If a child is out/sick or hospitalized tuition is still due. If the school is closed due to Hurricane or weather related issues, tuition is still due. Credits will not be issued, payment is to reserve your child's space during the time of loss and closure. Once their one-year anniversary is completed, they will receive 1 week vacation and their space at the center will be saved automatically while they are out. Vacation is to be used between Sept.-May. Non-ported/trained students will have a credit of \$125 per week, preschoolers and up will have a credit of \$95 per week.
- _____/_____. 6. Unless the space is pre-paid when you're out, you will have to re-register your child in school upon re-enrollment (depending on availability).
- _____/_____. 7. ~~All classes end at 5pm and children should be picked up by this time. We have from 5-6pm our emergency hour, & ALC staff member will remain with the child if a parent is running late. Parents will be charged a late fee of \$1 per minute after 5pm. This fee is due in cash upon picking up the child. ALC reserves the right to make any changes at any time and to refuse service.~~
- _____/_____. 8. It is mandatory for all students to arrive in school in their embroidered and proper school uniform, sold here at the school. Any child not in proper uniform will be ISSUED A UNIFORM AND PARENT WILL BE CHARGED THE PRICE OF THE UNIFORM.
- _____/_____. 9. All children MUST ARRIVE TO SCHOOL before 8:15am. Anyone arriving after 8:30 am will require a late pass. Parent and child arriving late will have to obtain the late pass from the main office. Your limit is 5 passes per year for emergency purposes. A letter will be issued after your 5th pass is issued. If you are late a sixth time or more you will be sent home with your child. With a doctor's note, child will be permitted to enter till 10am, doctor notes do not count toward's your 5 late passes.
- _____/_____. 10. Regular school year registration will always be collected in advance at the time of enrollment and every August thereafter this covers your child from August through May. In June you will have a separate registration for the summer camp, for period June through July. Always remember to register your child at least 3 months in advance of the new term.
- _____/_____. 11. All Pre-K3 to 1st grade students will have homework 3 times a week. All homework is to be completed on the proper day and returned to receive credit. Parents are responsible to help the child advance in school studies. The school will hold the parents responsible with academic accountability, accordance with sec. 1002.32(4) + 1002.39(4)e, Fla. statutes.
- _____/_____. 12. Toys, hats/caps and jewelry are not permitted and ALC will not be responsible for items getting lost.
- _____/_____. 13. It is the parents responsibility to make sure their child's medical records are updated at all times, children will be kept from school if medical records are not up to date.
- _____/_____. 14. Pre-K1 and up are required to bring in their fitted sheet and blanket labeled on a weekly basis inside a labeled large zip loc bag.
- _____/_____. 15. All children are to bring their lunch, snacks and boxed drinks daily and labeled. (Please do not send chocolates, soda, glass containers, sippy cups or thermos).
- _____/_____. 16. Please remember we are an extension of your home. All students are expected to follow school rules and be disciplined. Any student that is disrespectful, destroys property and/or not disciplined will be asked to be removed from the school and the parents will be responsible for any expenses incurred.
- _____/_____. 17. To withdraw/remove a student, parents must provide the school with a two week notice and a formal letter in writing. Not providing notice will cost 2 weeks of tuition.
- _____/_____. 18. As of the first day of school, parents are to wait at the door for their child at drop off and pick up for safety/liability reasons.
- _____/_____. 19. Always sign in and out on a daily basis. Parents on subsidized programs will be responsible for fees incurred due to missing signatures on sign in/out sheets.
- _____/_____. 20. Parents are responsible to notify the school in advance for a birthday party, to reserve the date. Parents are responsible to clean up and hose down site, parents are to notify the other parents/students by invitation, of the foods and drinks offered in case of an allergic reaction/allergies.

- ____/____/____ 21. Photocopies of receipts for tax or any other purposes will incur \$1.00 fee each, due to storage and handling fees.
 - ____/____/____ 22. Once a child has been signed out & removed from the center, the child can not be brought back to school.
 - ____/____/____ 23. Parents are to notify by phone immediately if their child is ill or out of school for any reason.
 - ____/____/____ 24. No documents/records will be released (Medical Records, copies, etc.) if student(s) has an outstanding balance with the school.
 - ____/____/____ 25. By signing below parents are giving permission for photographs to be taken of their child(ren) throughout the school year for school publications, presentations, holiday gifts to parents and year book.
 - ____/____/____ 26. Any additional fees, interest, penalties, court fees, collection fees and/or attorney fee's will be incurred by the parent with the outstanding balance if legal action is necessary to collect any outstanding debt, this debt must be collected within the county of Dade and in the state of Florida. Credit Bureau, Inc. or the collection company contracted at that time, will be the company collecting any outstanding debt(s).
- Aventura Learning Center, Inc. reserves the right to make any and all necessary changes to these policies. I (We) have read, understand and agree to comply with all procedures, policies and conditions set forth in this application presented by Aventura Learning Center, Inc.

Parents' Signature: _____ Date: _____
 Parents' Signature: _____ Date: _____

65C-22.004 HEALTH RELATED REQUIREMENTS
(2) COMMUNICABLE DISEASE CONTROL

____/____/____ A. Any child, child care personnel or other person in the child care facility suspected of having a communicable disease shall be removed from the facility or placed in and isolation area until removed. Such person may not return without medical authorization to return to school/work (doctor's note) or until the signs and symptoms of the disease are no longer present. With a child, the condition shall be reported to the custodial parent or legal guardian.

Signs and symptoms of as suspected communicable disease include any of the following:

1. Severe coughing, causing the child to become red or blue in the face or make a whooping sound.
2. difficult or rapid breathing
3. stiff neck
4. diarrhea (more than one abnormal loose stool within 24 hour period)
5. temperature of 101 degrees Fahrenheit or higher when in conjunction with any other signs of illness.
6. conjunctivitis (pink eye) green or eye white secretion from the eyes.
7. exposed, open skin lesions.
8. unusually dark urine and/or gray or white stool
9. yellowish of the skin or eyes
10. thick greenish/yellowish mucus from the nose, eyes or sinuses or any other symptoms of illness.

____/____/____ B. Outbreaks. Operators are required to notify the local county public health unit immediately upon any suspected outbreak of communicable disease in accordance with s10D-3.064, fac, Communicable Disease Control. A suspected outbreak occurs when two or more children or employees have the onset of similar signs or symptoms, as outlined in 2a 1-10 within a 72-hour period or when a case of a serious or reportable communicable disease is diagnosed or suspected in a child or employee.

____/____/____ C. Doctor's appointments should be scheduled early in the mornings or late afternoon. Children will only be accepted with a doctor's note until 10AM. Please remember once a child has been removed & signed out from the school they can not be brought back.

Please be prepared with your doctor's note when returning to school, it is mandatory!

Parents' signature _____ Date: _____
 Parents' signature _____ Date: _____

Authorization for release of Medical records and Information release Form

Please read and initial each segment of this consent form. By doing so you will acknowledge that you have read and understood the terms outlined below.

Medical Release: I hereby consent to disclosure of any such and all records of information concerning the treatment of the said patient/student maintained by the pediatricians office for the purpose of insurance claims or other claims for medical attention in cases of emergencies or medical benefits and for the exchange of information to the referring physician, psychologist, therapist or other referral source if appropriate.

Injury Release: It is understood that the risk of physical injury is inherent in dance training. ALC strives to reduce that risk. However, by signing this form, the undersigned is willing to assume those risks and release, hold harmless, and indemnify ALC, its related entities, agents, employees, officers and representatives from and against any and all claims, demands, actions, judgements which the undersigned, or any person ever had, or may have against ALC, for any losses, costs, and expenses (including attorney's fees) and damages or injuries known or unknown, real or personal, sustained by me or my child while in attendance and/or participating in all ALC programs. The undersigned also agrees that he or she will not hold ALC responsible for the loss or damage of personal property while in attendance and/or participating in any ALC programs.

Physical Contact: Dance, Gym, Ballet, Karate, Tennis, Tap, Belly Dancing, Yoga, Piano and/or any other type of special activity class is an art form that requires teachers to be able to have appropriate physical contact for the purpose of making technical corrections. Consent is granted for such physical contact.

Photo and Video Consent: Consent is granted for the student to be photographed or videotaped. These may be used without compensation in a public presentation. The student is free to refuse to be photographed or videotaped.

Rules and Policies: The signature below implies agreement to abide by the rules and policies of ALC. This includes, but is not limited to, behavior that exhibits respect to fellow students and the teacher as well as the facility.

Please list any medical or physical conditions that your child currently has:

Please list any medications that your child is currently taking:

The Aventura Learning Center, Preschool and Elementary school, adheres to a policy of nondiscrimination in employment and educational programs/activities and programs/activities receiving Federal financial assistance with the Department of Education, and strives affirmatively to provide equal opportunity for all as required by law.

Title VI of the Civil Rights Act of 1964 - prohibits discrimination on the basis of race, color, religion, or national origin.

Title VII of the Civil Rights Act of 1964, as amended - prohibits discrimination in employment on the basis of race, color, religion, gender, or national origin, for programs or activities receiving Federal financial assistance from the Department of Education.

Title IX of the Education Amendments of 1972 - prohibits discrimination of the basis on gender.

Florida Educational Equity Act (FEEA) - prohibits discrimination on the basis of race, gender, national origin, marital status, or handicap against a student or employee.

School Board Rules 6Gx13-4A-1.01, 6Gx13-4A-1.32 and 6Gx13-5D-1.10 - prohibits harassment and/or discrimination against a student or employee on the basis of gender, race, color, religion, ethnic or national origin, political beliefs, marital status, age, sexual orientation, social and family background linguistics preference, pregnancy, or disability.

Age Discrimination in the employment act of 1967 (ADEA)- as amended-prohibits discrimination on the basis of age with respect to individuals who are at least 40.

Section 504 of the Rehabilitation Act of 1973 - prohibits discrimination against the disabled.

Florida Civil Rights Act of 1992 - secures for all individuals within the state freedom from discrimination because of race, color, religion, sex, national origin, age, handicap, or marital status.

I/We, by signing below understand and accept/agree with these procedures, policies, practices and conditions set forth in this application presented by Aventura Learning Center, Inc.

Student's Name (please print) _____

Both Parent/Guardian's Signature _____ _____ Date: _____



Affidavit Of Volunteer

Pursuant to section 402.302(8), Florida Statutes, "child care personnel" includes "all owners, operators, employees, and volunteers working in a child care facility" except the following:

- A volunteer who assists on an intermittent basis for less than 40 hours per month is not included in the term "child care personnel" for the purposes of screening and training, provided that the volunteer is under direct and constant supervision of persons who meet the personnel requirements.
- Students who observe and participate in a child care facility as a part of their required coursework shall not be considered child care personnel, provided such observation and participation are on an intermittent basis and the students are under direct and constant supervision of child care personnel."

Under penalty of perjury, I attest that my name is _____ and I serve
Name of Volunteer
as a volunteer in the child care facility known as _____
Name of Facility

As a volunteer:

- I attest that do not receive any form of payment or remuneration such as money, free or reduced child care, or any other type of compensation for my time.
- I understand that I must be under the constant supervision of a screened staff person and may not be left alone or in charge of any group of children.
- I understand that if I volunteer 40 hours or more per month or receive some form of compensation, I must submit background screening information in accordance with section 402.3055, Florida Statutes, and receive the required child care training.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true and correct.

Signature of Affiant

Date

Sworn to and Subscribed before me this _____ day of _____, 20 _____

Notary Signature

Commission Expires

Form of identification presented: _____



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Signature of Affiant

Date

Sworn to and Subscribed before me this _____ day of _____, 20 _____.

Notary Signature

Commission Expires

Form of identification presented: _____



Office Use Only
Date _____

Teacher Recommendation Form

(To be completed by current classroom teacher)
Teacher is to forward this form directly to the address below

RECOMMENDATION FOR:
(Please print clearly)

Name of Student _____
School _____ Phone # _____
Grade _____

Please assess the student's ability and performance in your class.

	EXCELLENT	SATISFACTORY	NEEDS IMPROVEMENT	UNSATISFACTORY
Self Discipline				
Academic Potential				
Motivation				
Attendance				
Respect for Others				

Please complete using the following scale:

FREQUENTLY 3 SOMETIMES 2 SELDOM 1 UNABLE TO OBSERVE 0

- ___ Is enthusiastic about projects
- ___ Takes leadership role
- ___ Follows through on assigned tasks
- ___ Follows directions
- ___ Works independently
- ___ Is able to transfer knowledge
- ___ Works academically at or above grade level

Comments: _____

✓ One: ___ Recommended ___ Do not recommend

Recommending Teacher's Signature: _____ Date _____

Please forward this completed form:
Aventura Learning Center & Elementary
2221 N.E. 171st Street
North Miami Beach, FL. 33160