

BUSY BEACH



DAY CARE CENTER, INC.

**777 SEAVIEW AVENUE, BLDG. #11
STATEN ISLAND, NEWYORK 10305
OFFICE #: (718) 667-2861
FAX #: (718) 667-2538**

Cover Sheet/Check List for Enrollment Folder

For office Use, Only

The following papers must be signed and submitted prior to enrollment:

- Application Page (and proof of union affiliation is applicable).
- Medical history, (including immunization record, signed and dated by the child's pediatrician). *The medical history must be updated every six months for the children two and under and once a year from the children over two.*
- Emergency contact form and authorization for emergency medical treatment. *Emergency contact form must be updated as needed.*
- Enrollment Statement
- Parent Agreement, (confirming receipt and acceptance of the Parent Handbook guidelines).
- Consent for Photographing Child(ren)
- Extended Care Registration (If Applicable)
- Formula Consent (For Infants 3mths-12mths Only)
- Daily Food Schedule (For Infants 3mths-12mths Only)

For informational purposes only:

- Parent Handbook (Available at in house enrollment only).
- List of Things to Bring to School
- Schedule for School Closings
- Tuition Fee Schedule

The enrollment process is as follows:

- Tour of the school, which includes meeting the teachers, seeing the classroom, and observing the group
- Completing the Enrollment Packet
- Arranging Transition Visit(s) and Starting Date:

Transition Dates: _____, _____ & _____ **Start Date:** _____

- Paying initial fees, including

The Registration Fee:	_____
The Annual Supply Fee	_____
Two Week Deposit:	_____
Current Bi-Weekly Fee:	_____
Total Due:	_____

Enrollment Application

Child's Full Name: _____ Birth Date: _____

Home Address: _____ Zip Code: _____

Home Phone #: _____ Cell #: _____

Mother's Name: _____ Work #: _____

Work Site/Agency: _____ Union Affiliation: _____

Father's Name: _____ Work #: _____

Work Site/Agency: _____ Union Affiliation: _____

Tuition is calculated according to the following factors:

- Requested days of attendance:
Monday Tuesday Wednesday Thursday Friday

- Extended hours:
7:00 to 7:30 5:30 to 6:00

- Program:
Under One Year One to Two (Infant Room) Two to Three (Toddler Room)
Three to Five (Pre-K Room)

- State employee discount: _____ Or Sibling discount: _____

Weekly Tuition Rate: _____

Date of Application: _____ Date of Transition Visit(s): _____

Anticipated Entry Date: _____ Initial Payments Made: _____

Signature of Parent/Guardian

Relationship to Enrolled Child

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CONSENT FOR PHOTOGRAPHING

We may be publicizing the program through posters, brochures, television, newspaper articles, special events (such as the expo at the Staten Island Mall), Busy Beach Website and other publications. We will not use your child's name or photograph without specific written permission.

CHILD'S NAME: _____

I, Will Will not, allow my child to be photographed/video-taped for use in publicity materials and/or special events.

I, Will Will not, allow Busy Beach to publicize/display my child's art work on the Busy Beach Website.

Parent's Name (Please Print)

Date

Parent's Signature

Relationship to Child: _____

